

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions

A Public Document

1. Agency Name		Date Stamp	California Form 802
City of San Diego			For Official Use Only
Division, Department, or Region (If Applicable)			
Designated Agency Contact (Name, Title)			
Adrian Granda, Legislative Ticket Coordinator		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
Area Code/Phone Number	E-mail	Date of Original Filing: _____ <small>(Month, Day, Year)</small>	
619-236-6633	agranda@sandiego.gov		

2. Function or Event Information

Does the agency have a ticket policy? Yes No

Event Description San Diego Padres Special Concert Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No

Was ticket distribution made at the behest of agency official? No Yes

Face Value of Each Ticket/Pass \$ 322.50

Date(s) 9 / 28 / 14

If no: San Diego Padres Name of Source

If yes: Myrtle Cole Official's Name (Last, First)

3. Recipients

• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual <small>(Last, First)</small>	Number of Ticket(s)/Pass(es)	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below.</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below.</small>
C. Name of Outside Organization <small>(include address and description)</small>	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
Balboa Park Tennis Veterans 2221 Morley Field Drive S. D., Ca. 92104	6	Council Policy 700-22; Category 2-5

4. Verification

I have read (d)(5) sections 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

(d)(5) _____ Adrian Granda _____ Council Representative _____ 10/07/14
Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

Comment: _____