

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

A Public Document

1. Agency Name City of San Diego Division, Department, or Region (If Applicable)		Date Stamp	California Form 802 For Official Use Only
Designated Agency Contact (Name, Title) Diana Jurado-Sainz, Director of Legislative Affairs		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
Area Code/Phone Number 619-533-3920	E-mail juradosainz@sandiego.gov	Date of Original Filing: _____ (Month, Day, Year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ _____ 87.69

Event Description Padres Baseball Game Date(s) 6 / 14 / 13
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: San Diego Padres
Name of Source

Was ticket distribution made at the behest of agency official? No Yes If yes: Alvarez, David
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 (Last, First)	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 (Include address and description)	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
Jones & Mayer Law Firm 3777 N Harbor Blvd Fullerton, CA 92835	10	Category 1(6)

4. Verification
 I have read and understand FPFC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

	Adrian Granda	Council Representative	06/03/13
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(Month, Day, Year)</small>