

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

**A Public Document**

|  |        |  |                            |
|--|--------|--|----------------------------|
| <b>1. Agency Name</b>                                  |        | <b>Date Stamp</b>  | <b>California Form 802</b> |
| Division, Department, or Region <i>(if applicable)</i> |        |  | For Official Use Only      |
| Designated Agency Contact <i>(Name, Title)</i>         |        |  |                            |
| Area Code/Phone Number                                 | E-mail | <b>Amendment</b> <i>(Must Provide Explanation in Part 3.)</i>      |                            |
|  |        | <b>Date of Original Filing:</b> _____<br><i>(month, day, year)</i> |                            |

**2. Function or Event Information**

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

Event Description: \_\_\_\_\_    Date(s) \_\_\_\_/\_\_\_\_/\_\_\_\_    \_\_\_\_/\_\_\_\_/\_\_\_\_  
*Provide Title/ Explanation*

Ticket(s)/Pass(es) provided by agency?    Yes    No    If no: \_\_\_\_\_  
*Name of Source*

Was ticket distribution made at the behest of agency official?    Yes    No    If yes: \_\_\_\_\_  
*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)/ Passes | Describe the public purpose made pursuant to the agency's policy  |
|--|-----------------------------|---|
|  |                             |   |
|  |                             |   |
| B. Name of Individual <i>(Last, First)</i>                               | Number of Ticket(s)/ Passes | Identify one of the following:  |
|  |                             | Ceremonial Role      Other      Income<br><i>If checking "Ceremonial Role" or "Other" describe below:</i> |
|  |                             | Ceremonial Role      Other      Income<br><i>If checking "Ceremonial Role" or "Other" describe below:</i> |
| C. Name of Outside Organization <i>(include address and description)</i> | Number of Ticket(s)/ Passes | Describe the public purpose made pursuant to the agency's policy  |
|  |                             |   |
|  |                             |   |

**4. Verification**

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

  
 \_\_\_\_\_  
 Signature of Agency Head or Designee                      Print Name                      Title                      *(month, day, year)*

Comment: \_\_\_\_\_