

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

A Public Document

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|---|----------------------------------|--|--|
| 1. Agency Name City of Citrus Heights | | Date Stamp | California Form 802 <small>For Official Use Only</small> |
| Division, Department, or Region <i>(if applicable)</i> | | | |
| Designated Agency Contact <i>(Name, Title)</i> Amy Van, City Clerk | | <input type="checkbox"/> Amendment <i>(Must Provide Explanation in Part 3.)</i> | |
| Area Code/Phone Number 916-727-4704 | E-mail avan@citrusheights.net | | |

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 50.00

Event Description: Kiwanis Crab Feed Date(s) 01 / 21 / 18
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 |
|--|-----------------------------|--|
| Administrative Services | 1 | Ticket Policy section E. 3e |
| | | |
| B. Name of Individual <small>(Last, First)</small> | Number of Ticket(s)/ Passes | Identify one of the following: |
| Miller, Steve | 1 | Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Ticket Policy section E. 3e |
| Daniels, Bret | | Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Ticket Policy section E. 3e |
| | | |
| C. Name of Outside Organization <small>(include address and description)</small> | 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.

| | | | |
|---|--------------------------------------|------------------------------------|---|
| <small>Signature of Agency Head or Designee</small> | Amy Van <small>Print Name</small> | City Clerk <small>Title</small> | 02/06/18 <small>(month, day, year)</small> |
|---|--------------------------------------|------------------------------------|---|

Comment: _____