Agency Report of: Distributions Cer

eremonial Role Events and Ticket/Pass Distributions	A Public Documen		
Agency Name	Date Stamp	California Form 802	
Division, Department, or Region (if applicable)		For Official Use Only	

E-mail

Designated Agency Contact (Name, Title)

Area Code/Phone Number

					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 \$	
	Event Description:			Date(s)	//	//
	Ticket(s)/Pass(es) provided by agency?	Yes	No	lf 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

1.

• 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.

Α.	Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
В.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:
			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:
C.	Name of Outside Organization (include address and description)	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.

Sarue - Smiker Vini

Signature of Agency Head or Designee

Print Name

Title

(month, day, year)

Amendment (Must Provide Explanation in Part 3.)

Comment: