

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

**A Public Document**

1. Agency Name CITY OF SAN MARCOS Division, Department, or Region (If Applicable)		Date Stamp <b>RECEIVED</b> <b>AUG 09 2017</b> City Clerk Dept. City of San Marcos	California Form <b>802</b> For Official Use Only
Designated Agency Contact (Name, Title) LORI WILCOX, DEPUTY CITY CLERK		<input type="checkbox"/> <b>Amendment</b> (Must provide explanation in Part 3.) <b>Date of Original Filing:</b> _____ <small>(Month, Day, Year)</small>	
Area Code/Phone Number (760) 744-1050	E-mail LWILCOX@SAN-MARCOS.NET		

**2. Function or Event Information**

Does the agency have a ticket policy?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Face Value of Each Ticket/Pass \$ _____	\$300.00
Event Description	2017 Palomar College Starlit Gala <small>Provide Title/Explanation</small>	Date(s)	09 / 09 / 17 _____ / _____ / _____
Ticket(s)/Pass(es) provided by agency?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	If no:	<small>Name of Source</small>
Was ticket distribution made at the behest of agency official?	No <input checked="" type="checkbox"/> Yes <input type="checkbox"/>	If yes:	<small>Official's Name (Last, First)</small>

**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:		
Vice Mayor Jones		1	Ceremonial Role <input checked="" type="checkbox"/> Other <input type="checkbox"/>	Income <input type="checkbox"/>	<small>If checking "Ceremonial Role" or "Other" describe below:</small>
			PUBLIC PURPOSE FOR INTERGOVERNMENTAL RELATIONS		
Council Member Jabara		1	Ceremonial Role <input checked="" type="checkbox"/> Other <input type="checkbox"/>	Income <input type="checkbox"/>	<small>If checking "Ceremonial Role" or "Other" describe below:</small>
			PUBLIC PURPOSE FOR INTERGOVERNMENTAL RELATIONS		
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		

**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

JACK GRIFFIN

Print Name

CITY MANAGER

Title

07/26/2017

(Month, Day, Year)

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

FPPC Form 802 (4/12)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)