

**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

California Form **802**

For Official Use Only

RECEIVED

MAR 28 2018

City Clerk Dept.

City of San Marcos

Amendment (Must provide explanation in Part 3.)

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 \$ 150.00

Event Description Boys & Girls Club 39th Annual Auction
Provide Title/Explanation

Date(s) 04 / 28 / 18 _____ / _____ / _____

Ticket(s)/Pass(es) provided by agency? Yes No

If no: _____
Name of Source

Was ticket distribution made at the behest
of agency official? No Yes

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)/ 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:
DESMOND, JIM	1	Ceremonial Role <input checked="" type="checkbox"/> Other <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: PUBLIC PURPOSE FOR INTERGOVERNMENTAL RELATIONS	Income <input type="checkbox"/>
JABARA, KRISTAL	1	Ceremonial Role <input checked="" type="checkbox"/> Other <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: PUBLIC PURPOSE FOR INTERGOVERNMENTAL RELATIONS	Income <input type="checkbox"/>
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

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.

JACK GRIFFIN

CITY MANAGER

3/28/2018

Signature of Agency Head or Designee

Print Name

Title

(Month, Day, Year)

Comment: _____