

**A Public Document**

<b>1. Agency Name</b> CITY OF SAN MARCOS		<div style="border: 1px solid black; padding: 5px;">         Date Stamp  <div style="border: 2px solid blue; padding: 5px; text-align: center;">           RECEIVED             SEP 26 2018             City Clerk Dept.            City of San Marcos         </div> </div>	<b>California Form 802</b>
<b>Division, Department, or Region</b> <i>(If Applicable)</i>			For Official Use Only
<b>Designated Agency Contact</b> <i>(Name, Title)</i> LORI WILCOX, DEPUTY CITY CLERK			
<b>Area Code/Phone Number</b> (760) 744-1050	<b>E-mail</b> LWILCOX@SAN-MARCOS.NET	<input type="checkbox"/> <b>Amendment</b> <i>(Must provide explanation in Part 3.)</i>  <b>Date of Original Filing:</b> _____ <div style="text-align: right;"><i>(Month, Day, Year)</i></div>	

## 2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐

Face Value of Each Ticket/Pass \$                      \$375.00

Event Description	Solutions for Change 2018 Gala Event
	<i>Provide Title/Explanation</i>

Date(s) 09 / 22 / 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 <small>(Last, First)</small>	Number of Ticket(s)/ Pass(es)	Identify one of the following:
DESMOND, JIM	1	Ceremonial Role <input checked="" type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i> <b>PUBLIC PURPOSE FOR INTERGOVERNMENTAL RELATIONS</b>
	1	Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
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 FPFC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

	JACK GRIFFIN	CITY MANAGER	09/26/2018
<i>Signature of Agency Head or Designee</i>	<i>Print Name</i>	<i>Title</i>	<i>(Month, Day, Year)</i>

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