

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

A Public Document

1. Agency Name City of Dana Point Division, Department, or Region (if applicable)		Date Stamp CITY OF DANA POINT 2017 JUN 13 A 9:20	California Form 802 For Official Use Only
Designated Agency Contact (Name, Title) Kathy Ward, City Clerk		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.)	Date of Original Filing: <u>6/13/17</u> (month, day, year)
Area Code/Phone Number 949/248-3505	E-mail kward@danapoint.org		

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 250.00

Event Description: Doheny Blues Festival Date(s) 05 / 21 / 17
Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: Doheny Blues Festival
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
		Promotion of open government by City Officials appearances at...
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
See Continuation Sheet	2	Ceremonial Role <input checked="" type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i> Promotion of open government by City Officials appearances at...
		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)/ 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.

Kathy Ward _____ Kathy Ward _____ City Clerk _____ 6/13/17
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: _____

FORM 802
CONTINUATION SHEET
May 1 - 31, 2017

Date	Event	Public Purpose or Income	Ticket Recipient	Location	Attendees	Amount	Provided to City (gratuitous/city paid)	Tickets
5/21/2017	Doheny Blues Festival	Promotion of open government by City Officials appearances at ...	Mayor	Doheny State Beach	 Debra Lewis	\$250.00	Gratuitous	2