

Agency Report of:
 Ceremonial Role Events and
 Ticket/Admission Distributions

A Public Document

1. Agency Name <u>City of Dana Point</u>		RECEIVED Date Stamp 2011 MAY 18 P 4:10 CITY OF DANA POINT	California Form 802 For Official Use Only
Division, Department, or Region (if applicable)			
Street Address <u>33282 Golden Lantern, #203, D.P.</u>			
Designated Agency Contact (Name, Title) <u>Kathy Ward, City Clerk</u>		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
Area Code/Phone Number <u>949/248-3505</u>	E-mail <u>Kward@dana.point.org</u>	Date of Original Filing: <u>5/18/11</u> (month, day, year)	

2. Function, Event, or Ceremonial Role Information

Title 2nd Annual O.C. CA Wine Festival Face Value of Each Admission \$ 100/75

Description O.C. CA Wine Festival Date(s) 4, 30, 11

Ticket(s)/Admission(s) provided by agency? Yes No If no: _____
 Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes No If yes: J. Scott Schoeffel, Mayor
 Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	Income
<u>Westbrook, Ken</u>	<u>2</u>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	<u>See continuation sheet</u> <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>

3. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

Kathy Ward Signature of Agency Head or Designee
Kathy Ward Print Name
City Clerk Title
5/18/11 (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)