

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

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<b>1. Agency Name</b> City of Palm Springs		2016 JUN -6 AM 9:59 JAMES THOMPSON CITY CLERK	California Form <b>802</b> For Official Use Only
Division, Department, or Region (If Applicable)			
Designated Agency Contact (Name, Title) Jennifer Nelson, Executive Asst. to Mayor/Council		<input type="checkbox"/> Amendment (Must provide explanation in Part 3)	
Area Code/Phone Number 760-323-8200	E-mail jennifer.nelson@palmspringsca.gov	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 \$ 125.00

Event Description Arthur Lyons Film Festival Date(s) 5 / 12 / 16 5 / 15 / 16  
*Provide Title/Explanation*

Ticket(s)/Pass(es) provided by agency? Yes  No  If no: Palm Springs Cultural Center  
*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:
Moon, Robert	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i> Public Purpose as defined by PS Resolution No. 22454
Foat, Ginny	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i> Public Purpose as defined by PS Resolution No. 22454
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.

Signature of Agency Head or Designee: [Signature] Print Name: David H. Ready Title: City Manager (Month, Day, Year): \_\_\_\_\_

**Agency Report of:  
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Continuation Sheet**

Agency Name  
City of Palm Springs

**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:
Mills, Chris	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Public Purpose as defined by PS Resolution No. 22454
Roberts, JR	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Public Purpose as defined by PS Resolution No. 22454
Kors, Geoff	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Public Purpose as defined by PS Resolution No. 22454
Cairns, Cindy	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Public Purpose as defined by PS Resolution No. 22454
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