Ceremonial Role Events and Ticket/Pass Distributions A Public Document Date Stamp REC California 1. Agency Name CITY OF P City of Palm Springs For Official Use Only Division, Department, or Region (if applicable) 2017 APR 24 PM 5: 44 OFFICE OF THE CITY CLERK Designated Agency Contact (Name, Title) Cindy Cairns. Executive Services Administrator Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: cindy.cairns@palmspringsca.gov 760-322-8362 (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 75.00 Does the agency have a ticket policy? Yes ☑ No □ Event Description: Spa Resort Casino NYE Block Party Date(s) ____/_ Provide Title/Explanation If no: Spa Resort Casino Ticket(s)/Pass(es) provided by agency? Yes ☐ No 🖾 Name of Source Was ticket distribution made at the behest Yes ☐ No 🗵 Official's Name (Last, First) of agency official? 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. Number Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ A. Passes Number Name of Individual Identify one of the following: В. of Ticket(s)/ (Last, First) Passes Other 🗵 Ceremonial Role If checking "Ceremonial Role" or "Other" describe below. 2 Moon, Robert Public Purpose as defined by PS Resolution No. 22454 Other 🗵 Ceremonial Role If checking "Ceremonial Role" or "Other" describe below. 2 Foat, Ginny Public Purpose as defined by PS Resolution No. 22454 Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ C. (include address and description) Passes 4. Verification Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance I have read and understand FRP with the requirements. City Manager David Ready Print Name Signature of Agency Head or

Agency Report of:

Comment:

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



gency Name		
of Palm Springs Recipients	the Cartier Danie	identify an individual at Use Section C to identify an outside overanization
A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Mills, Chris	2	Ceremonial Role Other Months Income Public Purpose as defined by PS Resolution No. 22454
Kors, Geoff	2	Ceremonial Role Other Income Income Income Income Income Public Purpose as defined by PS Resolution No. 22454
Roberts, J.R.	2	Ceremonial Role Other Important Income Income Income Income Income Income Income Public Purpose as defined by PS Resolution No. 22454
Ready, David	2	Ceremonial Role Other Implication Income Public Purpose as defined by PS Resolution No. 22454
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