Agency Report of: **Ceremonial Role Events and Ticket/Pass Distributions** A Public Document 1. Agency Name City of Palm Springs For Official Use Only 2017 APR 24 PM 5 44 Division, Department, or Region (if applicable) FICE 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:** 760-322-8362 cindy.cairns@palmspringsca.gov (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 100.00 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Art Palm Springs Date(s) __02__/_ 16 / Provide Title/ Explanation If no: Art Palm Springs Ticket(s)/Pass(es) provided by agency? Yes ☐ No 🗵 Was ticket distribution made at the behest Yes ☐ No ☑ If yes: _ 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 Ceremonial Role Other 🗵 Moon, Robert If checking "Ceremonial Role" or "Other" describe below 2 Public Purpose as defined by PS Resolution No. 22454 Other 🖾 Ceremonial Role Foat, Ginny If checking "Ceremonial Role" or "Other" describe below 1 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 I have read and understand FPIC 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

Comment:

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



Agency Name			
of Paln	n Springs		
	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
B.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Roberts, J.R.		1	Ceremonial Role Other Medical Income If checking "Ceremonial Role" or "Other" describe below. Public Purpose as defined by PS Resolution No. 22454
Kors, Geoff		1	Ceremonial Role Other Management Income If checking "Caremonial Role" or "Other" describe below: Public Purpose as defined by PS Resolution No. 22454
Mills, Chris		1	Ceremonial Role Other Management Income If checking "Ceremonial Role" or "Other" describe below: Public Purpose as defined by PS Resolution No. 22454
Hart, Kathie		1	Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: Public Purpose as defined by PS Resolution No. 22454
<u>c.</u>	Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

Form 802 – Additional Tickets for Art Palm Springs 02/16-19/2017

Gladders, Craig $-\,1$ Public Purpose as described by PS Resolution No. 22454