

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

*Handwritten:* A Public Document

<b>1. Agency Name</b> City of Palm Springs		RECEIVED CITY OF PALM SPRINGS 2017 OCT 11 PM 3:14 OFFICE OF THE CITY CLERK	California Form <b>802</b> For Official Use Only
Division, Department, or Region (if applicable)			<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _____ (month, day, year)
Designated Agency Contact (Name, Title) Christina Chartier, Executive Assistant to Mayor and Council			
Area Code/Phone Number 760-322-8366	E-mail christina.chartier@palm Springsca.gov		

**2. Function or Event Information**

Does the agency have a ticket policy? Yes  No  Face Value of Each Ticket/Pass \$ 20.00

Event Description: 17th Annual Best of the Best Awards Date(s) 10 / 03 / 17

*Provide Title/Explanation*

Ticket(s)/Pass(es) provided by agency? Yes  No  If no: \_\_\_\_\_  
*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
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Moon, Robert	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: Public Purpose as defined by PS Resolution No. 22454
Roberts, J.R.	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: 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

**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: *David Reedy* Print Name: David Reedy Title: City Manager Date: 10-11-17  
 (month, day, year)

Comment: \_\_\_\_\_

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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)/ 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:
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
Mills, Chris	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
Kors, Geoff	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
Ready, David	1	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)/ Passes	Describe the public purpose made pursuant to the agency's policy