Seremonial Role Events and Ti	cket/Pass Distri			Public Document
. Agency Name		CITY OF F	ALM Bale Stamp	California 802
City of Palm Springs Division, Department, or Region (if application)	2/0)		31 AM 8: 52	For Official Use Only
Division, Department, of Region (if applical	ne,	2018 JAN		
Designated Agency Contact (Name, Title)		DEFICE OF	THE CITY CLERK	
Christina Chartier, Executive Assistant	to Mayor and Council			
Area Code/Phone Number E-mail	•		Must I	Provide Explanation in Part 3.)
730-322-8366 christina.c	hartier@palmspringsc	a.gov	Date of Original Filing:	(month, day, year)
. Function or Event Information				
Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Ea			Each Ticket/Pass \$ $\frac{2}{}$	0.00
Event Description: Digicom Ten Best V	deo [Date(s)11/	09 , 17	
Ticket(s)/Pass(es) provided by agency?	• 14	f no:		
			Name of Source	
Was ticket distribution made at the beha	est Yes □ No 🗵 🏻 If	f yes:	Official's Name (Last, First)	
of agency official?				
. Recipients		· · · · ·		
• Use Section A to identify the agency's departmen	t or unit. • Use Section B to	identify an individ	ual. • Use Section C to iden	itify an outside organization.
A. Name of Agency, Department or Unit	Number of Ticket(s)/	Describe the public purpose made pursuant to the agency's policy		
	Passes			
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes		Identify one of the	following:
Moon, Robert	1	If check		
Foat, Ginny	1	Cerem If check	onial Role Other [ing "Ceremonial Role" or "Other" d se as define by PS F	escribe below:
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe th	e public purpose made pu	rsuant to the agency's policy
. Verification	1			
4 //	ons 18944.1 and 18942.	I have verified t	hat the distribution set	forth above, is in accordance
with the requirements.				
/ 1//	David Ready		City Manager	11-15-17
Signature of Agency Head of Designee	Print Name		Title	(month, day, year)
Comment:				

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



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(a)/ Passes	Identify one of the following:			
Mills, Chris	1	Ceremonial Role Other M Income			
		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below.			
y.		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:			
ş-		Ceremonial Role Other Income Income It checking "Ceremonial Role" or "Other" describe below:			
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			
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