Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name RECEIV Date Stamp California SITY OF PALM SPRINGS Form City of Palm Springs For Official Use Only Division, Department, or Region (if applicable) 19 PM 12: 03 2018 JUL Designated Agency Contact (Name, Title) THE CITY CLERA V **EFFICE OF** Christina Chartier, Executive Assistant to Mayor and Council ■ Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: 760-322-8366 christina.chartier@palmspringsca.gov (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 85.00 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: St. Teresa School Luncheon Date(s) 12 / 12 / Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No □ If 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 Name of Agency, Department or Unit of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy Α. **Passes** Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) Passes Ceremonial Role Other 🔲 Moon, Robert If checking "Ceremonial Role" or "Other" describe below 1 Public Purpose as defined by PS Resolution No. 22454, Section 1(d)(vii) Other 🗵 Ceremonial Role If checking "Ceremonial Role" or "Other" describe b Middleton, Lisa 1 Public Purpose as defined by PS Resolution No. 22454, Section 1(d)(vii) 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 FRAC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements. David Ready City Manager Signature of Agency Head Print Name Title (month, day, year)

Comment:

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



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Recip	NIS A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.		
Α.	Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
В.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
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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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