Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name R E (Dale Stamp) California OF PALH SPRING Form SIT City of Palm Springs For Official Use Only Division, Department, or Region (if applicable) 2010 JUL 19 AM 8: 03 Designated Agency Contact (Name, Title) EFFICE OF THE CITY CLES 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 \$  $\frac{30.00}{}$ Does the agency have a ticket policy? Yes⊠ No 🗆 Event Description: PSHA Luncheon Date(s) 06 21 Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No □ If no: \_ Name of Source 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 A. Passes Number Name of Individual B. of Ticket(s)/ Identify one of the following: (Last, First) Passes Other 🗵 Ceremonial Role Income Robert Moon If checking "Ceremonial Role" or "Other 1 Public Purpose as defined by PS Resolution No. 22454, Section 1 (d)(vii) Ceremonial Role Other 🗵 if checking "Ceremonial Role" or "Other" describe below **Geoff Kors** 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 C. of Ticket(s)/ (include address and description) Passes 4. Verification I have read and understand FPAC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements. David Ready City Manager

Print Name

Signature of Agency Head of Det

Comment:

(month, day, year)

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



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Α.	Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
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В.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Chris	sty Holstege	1	Ceremonial Role Other M Income
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below
			Ceremonial Role Other Income Income It checking "Ceremonial Role" or "Other" describe below:
			Ceremonial Role Other Income Income If 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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