Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions CEIV A Public Document 1. Agency Name Date Stamp California **Form** City of Palm Springs Onto MAR 2 PM 2: 11 For Official Use Only Division, Department, or Region (if applicable) SPEISE OF THE CITY CLERA Designated Agency Contact (Name, Title) 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 \$ 75.00 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Halloween Palm Springs Date(s) _ 10 31 Provide Title/ Explanation If no: Halloween Palm Springs Ticket(s)/Pass(es) provided by agency? Yes ☐ No 🗵 Name of Source Was ticket distribution made at the behest Yes ☐ No ☒ 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 Describe the public purpose made pursuant to the agency's policy A. of Ticket(s)/ **Passes** Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) Passes Ceremonial Role Other X Income ___ Roberts, J.R. If checking "Ceremonial Role" or "Other" describe below. 3 Public Purpose as defined by PS Resolution No. 22454, Section 1 (d)(iii)(vii)(viii) Ceremonial Role Other X Moon, Robert If checking "Ceremonial Role" or "Other" describe below. 2 Public Purpose as defined by PS Resolution No. 22454, Section 1 (d)(iii)(vii)(viii) 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

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I have read and understand with the requirements.	PPC 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 or Designee	Print Name	Title	(month, day, year)
Comment			

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



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Reci	m Springs pients ection A to identify the agency's department or uni	t. • 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:
Holste	ege, Christy	2	Ceremonial Role Other M Income If checking "Ceremonial Role" or "Other" describe below: Public Purpose as defined by PS Resolution No. 22454, Section 1 (d)(iii)(vii)(viii)
Middle	eton, Lisa	2	Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below. Public Purpose as defined by PS Resolution No. 22454, Section 1 (d)(iii)(vii)(viii)
Ready	y, David	1	Ceremonial Role Other Income If checking 'Ceremonial Role' or 'Other' describe below: Public Purpose as defined by PS Resolution No. 22454, Section 1 (d)(x)
			Ceremonial Role Other Income
<u>с.</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