	gency Report of: eremonial Role Even	ts and Ticket/P	ass Distri	ibutions	RECEIVEN	Public Document
1.	Agency Name				CITY bate Stamp 17 SP	California 802
	City of Palm Springs				0000 100 16 PM	
	Division, Department, or Region (if applicable)				2020 APR 16 PM	For Official Use Only
				DEFICE OF THE CITY	CLERK	
	Designated Agency Contact (Name, Title)					
	Shari Wrona, Executive Services Administrator				Amendment (Must Pro	vide Explanation in Part 3.)
	Area Code/Phone Number	E-mail			1	
	760-322-8632	shari.wrona@palmspringsca.gov			Date of Original Filing:(month, day, year)	
2.	Function or Event Information					
	Does the agency have a ticket policy? Yes ⊠ No □ Face Value of Each Ticket/Pass \$ 12.00					
	Event Description: Nancy Sinatra Historic Plaza Theatre Provide Title/ Explanation Date(s) 02 /				<u>, 16 , 20 </u>	02 / 16 / 20
	Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: Modernis				sm Week	
					Name of Source	
	Was ticket distribution made at the behest Yes ☐ No ☒ If yes:				Official's Name (Last, First)	
	of agency official?					
3.	Recipients • Use Section A to identify the agenta A. Name of Agency, Dep		Use Section B to Number of Ticket(s)/ Passes		dual. • Use Section C to identifue public purpose made purs	
	B. Name of Individual (Last, First)		Number of Ticket(s)/ Passes		Identify one of the fo	llowing:
	(2007)		rasses	Const	monial Role Other	Income [
	Woods, Dennis		2	Public Purp	king "Ceremonial Role" or "Other" desc	
	Ready, David		1	Ceremonial Role Other Income I		
	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 FI with the requirements	PPC Regulations 18944	1.1 and 18942.	I have verified	that the distribution set fo	rth above, is in accordance
	with the requirements.				011 11	
	Signature of Agency Head or Desig		rint Name		City Manager Title	(month, day, year)
	Signature and Joseph					(3,00,000)
	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(s)/ Passes	Identify one of the following:				
Blaisdell, Amy	1	Ceremonial Role Other Income I				
Pauley, Nancy	1	Ceremonial Role Other Income I				
Goedhart, Veronica	1	Ceremonial Role Other Income I				
Foat, Ginny	2	Ceremonial Role Other Income Income				
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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