Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions RECEIVED **A Public Document** 1. Agency Name PALPHISRIPHIGS California Form City of Palm Springs <del>2020 AU</del>G -5 AM 9: 54 For Official Use Only Division, Department, or Region (if applicable) OFFICE OF THE CITY CLERK Designated Agency Contact (Name, Title) Shari Wrona, Executive Services Administrator Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail **Date of Original Filing:** 760-322-8632 shari.wrona@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 Member Luncheon Date(s) \_\_\_\_/\_ 20 / 20 20 Provide Title/Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ 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 Describe the public purpose made pursuant to the agency's policy A. of Ticket(s)/ Passes Number Name of Individual В. Identify one of the following: of Ticket(s)/ (Last, First) Passes Ceremonial Role Other  $\square$ If checking "Ceremonial Role" or "Other" describe below 1 Middleton, Lisa Public Purpose as described by PS Resolution No. 22454, Section 1(d)(vii)(viii)(xi) Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below Garner, Grace Public Purpose as described by PS Resolution No. 22454, Section 1(d)(vii)(viii)(xi) Number Name of Outside Organization of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy C. (include address and description) Passes 4. Verification Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance I have read and understand FPR with the requirements. **David Ready** City Manager Signature of Agency Head of the Print Name (month, day, year) Comment:

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



ty of Palm Springs  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 of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy	
Number of Ticket(s)/ Passes	Identify one of the following:	
2	Ceremonial Role Other Income I	
	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:	
	Ceremonial Role  Other  Income If checking "Ceremonial Role" or "Other" describe below:	
	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:	
Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy	
	Number of Ticket(s)/ Passes  Number of Ticket(s)/ Passes  2  Number of Ticket(s)/ Passes	