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

A Public Document

_					·			
1.	Agency Name				Date Stamp	California 802		
City of La Habra						Form OUZ		
	Division, Department, or Region (if applicable)					For Official Use Only		
	Designated Assessed Control of the							
	Designated Agency Contact (Name, Title)							
	Tamara D. Mason				Amendment (Must Provide Explanation in Part 3.)			
	Area Code/Phone Number			07/11/17				
	562-383-4030	tmason@lahabraca	a.gov		Date of Original Filing	g: (month, day, year)		
2.	Function or Event Information							
	Does the agency have a ticl	⊠ No □ F	ace Value of	Each Ticket/Pass \$	38.00			
	Event Description: La Habra	a State of the Commo	, 24 , 17					
	Ticket(s)/Pass(es) provided	•	Name of Source					
	Was ticket distribution made at the behest Yes ☐ No ☒ If yes:				Official's Name (Last, Fire	st)		
	of agency official?							
3.	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				
	City Manager's Office		1	Promotion of City resources, growth, and development				
	Community Services Department		2	Promotion of City resources, growth, and development				
	B. Name of Individual (Last, First)		Number of Ticket(s)/ Passes	Identify one of the following:				
	Gomez, James		1	If check	nonial Role Other king "Ceremonial Role" or "Other of City resources, gro			
	Blazey, Michael			If chec	nonial Role Other king "Ceremonial Role" or "Other f City resources, gro			
	C. Name of Outside O (include address and		Number of Ticket(s)/ Passes	Describe th	ne public purpose made p	oursuant to the agency's policy		
_	Verification							
4.	verification I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance							
	with the requirements.	TO Regulations 10944	r. 1 auu 10942.	i iiave velilleü	urat tire distribution Se	c form above, is in accordance		
	·	ra D. Mason		City Clerk	07/11/17			
	Signature of Agency Head or Design	rint Name		Title	(month, day, year)			
	Comment:							

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



ontinuation Sheet		A Public Document				
gency Name						
of La Habra						
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				
Finance Department	1	Promotion of City resources, growth, and development				
Community Development Department	3	Promotion of City resources, growth, and development				
0						
	Number					
B. Name of Individual (Last, First)	of Ticket(s)/ Passes	Identify one of the following:				
Beamish, Tom City Council	1	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below: Promotion of City resources, growth, and development				
Felix, Kathy Community Services Commission	1	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below: Promotion of City resources, growth, and development				
Bernier, Michelle Planning Commission	1	Ceremonial Role Other Income Income				
Holthouser, Dawn Planning Commission	1	Ceremonial Role Other Income Income Income The checking "Ceremonial Role" or "Other" describe below: Promotion of City resources, growth, and development				
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				