

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

A Public Document

1. Agency Name

City of West Hollywood  
 Division, Department, or Region (If Applicable)  
 City Manager's Department  
 Designated Agency Contact (Name, Title)  
 Paul Arevalo, City Manager  
 Area Code/Phone Number | E-mail  
 323-848-6400

**RECEIVED**  
 CITY OF WEST HOLLYWOOD  
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California Form **802**

For Official Use Only

Amendment (Must provide explanation in Part 3.)  
 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 \$ 39.99

Event Description "Holding the Man" (theatrical play)  
 Provide Title/Explanation

Date(s) 06 / 05 / 14 06 / 05 / 14

Ticket(s)/Pass(es) provided by agency? Yes  No

If no: Australian Theatre Company  
 Name of Source

Was ticket distribution made at the behest of agency official? No  Yes

If yes: \_\_\_\_\_  
 Official's Name (Last, First)

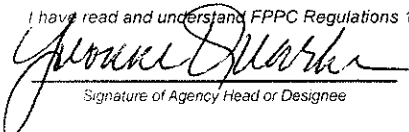
3. Recipients

• 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)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Pass(es)	Identify one of the following:
Robert Romero	2	Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input checked="" type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:
	2	Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy

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.

 Yvonne Quarker City Clerk 06/09/14  
 Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

Comment: \_\_\_\_\_