

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

RECEIVED A Public Document

1. Agency Name		CITY OF WEST HOLLYWOOD Date Stamp: 14 JUN 24 PM 1:54 OFFICE OF THE CITY CLERK	California Form 802 For Official Use Only
City of West Hollywood			
Division, Department, or Region (If Applicable)			
City Manager's Department			
Designated Agency Contact (Name, Title)		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: _____ (Month, Day, Year)	
Paul Arevalo, City Manager			
Area Code/Phone Number	E-mail		
323-848-6400			

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 125.00

Event Description State of the City Date(s) 6 / 18 / 14
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: CIM Group
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
East Side Working Group (only 6 were used)	15	Ticket Policy - Section 5(A)
B. Name of Individual (Last, First)	Number of Ticket(s)/Pass(es)	Identify one of the following:
	1	Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:
	1	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 06/24/14
Signature of Agency Head or Designee Print Name Title (Month, Day, Year)