Agency Report of:

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 Date of Original Filling:	er	emonial Role Events and Tick	cet/Pass	Distributions	FREIVED	A Public Documer	
City Manager's Department or Region (# Applicable) City Manager's Department Designated Agency Contact (Name, Title) Paul Arevalo, City Manager Area Code/Phone Number 233-848-6400 Function or Event Information Does the agency have a ticket policy? Yes ☑ No ☐ Face Value of Each Ticket/Pass \$			SIPY OF	WESTCHRISTON	California 802		
City Manager's Department Designated Agency Contact (Name, Title) Paul Arevalo, City Manager Area Code/Phone Number Charilla	С	ity of West Hollywood			ì		
Designated Agency Contact (Name, 7file) Paul Arevalo, City Manager Area Code/Phone Number E-mail Date of Original Filing: (Month, Day, Year) Function or Event Information Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 5 Event Description HBO Emmy Party Provide TitlerExplanation Face Value of Each Ticket/Pass \$ 5 Event Description HBO Emmy Party Provide TitlerExplanation Face Value of Each Ticket/Pass \$ 5 Event Description HBO Emmy Party Provide TitlerExplanation Face Value of Each Ticket/Pass \$ 5 Event Description HBO Emmy Party Date(s) 08 25 14 08 25 Frowtier TitlerExplanation Face Value of Each Ticket/Pass \$ 5 Event Description HBO Emmy Party Date(s) 08 25 14 08 25 Frowtier TitlerExplanation Face Value of Each Ticket/Pass \$ 5 Event Description HBO Emmy Party Date(s) 08 25 14 08 25 Frowtier TitlerExplanation Face Value of Each Ticket/Pass \$ 5 Event Description HBO Emmy Party Date(s) 08 25 14 08 25 If no: HBO Name of Source If yes: Official's Name (Last, First) Recipients • Use Section A to Identify the agency's department or unit Number of Ticket(s) Pass(es) Event Describe the public purpose made pursuant to the agency's polic if concerned Role Other Market or "Other Oscaribe below: Ticket Policy - Section 5(A) Event Describe the public purpose made pursuant to the agency's polic if concerned Role Other Market or "Other Oscaribe below: Ticket Policy - Section 5(A) Event Describe the public purpose made pursuant to the agency's polic include address and description Pass(es) Pass(es) Event Describe the public purpose made pursuant to the agency's polic include address and description Pass(es) Pass(es) Describe the public purpose made pursuant to the agency's polic include address and description Pass(es) Pass(es) Describe the public purpose made pursuant to the agency's polic include address and descrip	Dì	vision, Department, or Region (If Applicable)			•	For Official Use Only	
Paul Arevalo, City Manager	С	ity Manager's Department		OFFICE	OF THE CITY CLERK		
Area Code/Phone Number 323-848-6400 Function or Event Information Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$	De	esignated Agency Contact (Name, Title)					
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Function or Event Information Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 5		· · · · · · · · · · · · · · · · · · ·			Amendment (Must pro	vide explanation in Part 3.)	
Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 5 Event Description HBO Emmy Party Provide TitleExplanation Ticket(s)/Pass(es) provided by agency? Yes No Mane of Source Was ticket distribution made at the behest of agency official? Was ticket distribution made at the behest 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 organiz. A. Name of Agency, Department or Unit Ticket(s)/Pass(es) B. Name of individual (Less Fre) Number of Ticket(s)/Pass(es) Ceremonial Role Other Mascrete below: Ticket Policy - Section 5(A) C. Name of Outside Organization (Include address and description) Verification	32	23-848 - 6400			Date of Original Filing:	(Month, Day, Year)	
Event Description HBO Emmy Party Provide Title(Explanation Ticket(s)/Pass(es) provided by agency? Yes \ No \ Ticket(s)/Pass(es) Pass(es) Was ticket distribution made at the behest 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 organize. A. Name of Agency, Department or Unit Number of Ticket(s)/Pass(es) Describe the public purpose made pursuant to the agency's police. B. Name of Individual Number of Ticket(s)/Pass(es) Ceremonial Role Other \ Ticket(s)/Pass(es) Councilmember Abbe Land Ceremonial Role Other \ Ticket(s)/Pass(es) Mayor Pro Tempore John Heilman Mayor Pro Tempore John Heilman Mayor Pro Tempore John Heilman Describe the public purpose made pursuant to the agency's police. C. Name of Outside Organization Ceremonial Role Other \ Ticket(s)/Pass(es) Pass(es) Describe the public purpose made pursuant to the agency's police. Describe the public purpose made pursuant to the agency's police.	F	unction or Event Information	· · · · · · · · · · · · · · · · · · ·				
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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 floating and provided in the agency's policy. - Name of Agency, Department or Unit. - Name of Individual floating in the Agency's policy. - Name of Individual floating in the Agency's policy. - Name of Outside Organization floating in the Agency's policy. - Name of Outside Organization floating in the Agency's policy. - Name of Outside Organization floating in the Agency's policy. - Name of Outside Organization floating in the Agency's policy. - Name of Outside Organization floating in the Agency's policy. - Name of Outside Organization floating in the Agency's policy. - Name of Outside Organization floating in the Agency's policy. - Outside Outside Organization floating in the Agency's policy. - Outside Outside Organization floating in the Agency in					Name of Sour	ce	
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A. Name of Agency, Department or Unit Number of Ticket(s) Pass(es)		·					
B. Name of Individual [Last, Faral] Number of Ticket(s) Identify one of the following: Councilmember Abbe Land Ceremonial Role Other Othe		Number of					
B. Name of Individual [Cast Finity] Pass(es) Councilmember Abbe Land	Α	Name of Agency, Department or Unit	Ticket(s)/	Describe the pub	lic purpose made pursuant t	o the agency's policy	
Councilmember Abbe Land Councilmember Abbe La	_ B	. Name of individual			Identify one of the followin	o:	
Councilmember Abbe Land If checking "Ceremonial Role" or "Other" describe below: Ticket Policy - Section 5(A) Mayor Pro Tempore John Heilman		(Lest First)					
Ticket Policy - Section 5(A) Ceremonial Role ☐ Other ☒ If the clothing "Ceremonial Role" or "Other" describe below: Ticket Policy - Section 5(A) C. Name of Outside Organization (include address and description) Number of Pass(es) Describe the public purpose made pursuant to the agency's policy pass(es) Number of Ticket(s)/ Pass(es)	C	ouncilmember Abbe Land		1	·	Income	
Mayor Pro Tempore John Heilman Ceremonial Role Other Mellow: If checking "Ceremonial Role" or "Other" describe below: Ticket Policy - Section 5(A) Number of Ticket(s)/Pass(es) Describe the public purpose made pursuant to the agency's policing pass(es) Verification	_		2				
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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 pass(es) Verification	M	ayor Pro Tempore John Heilman	j	1			
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(include address and description) Pass(es) Verification	_	Name of Outside Organization					
	U.			Describe the pub	lic purpose made pursuant b	o the agency's policy	
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.	Ve	erification		·			
/ Allen XIII A General DILADED HIN DIFOR OLI	Tha	ive read and understand FPPC Regulations 18944.1 and 1	18942. I have ve	erified that the distribution set fo	orth above, is in accordance with	the requirements.	
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Signature of Agency Head or Designee Print Name Title (Month, Da		Signature of Agency Head or Designee	Print Nam	о <u>е</u>	Title	(Month, Day, Year)	
Comment:	C-	omment.					