

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions RECEIVED A Public Document

1. Agency Name City of West Hollywood		CITY OF WEST HOLLYWOOD 17 SEP 26 AM 11:04 OFFICE OF THE CITY CLERK	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) City Manager's Department			
Designated Agency Contact (Name, Title) Paul Arevalo, City Manager			
Area Code/Phone Number 323-848-6400	E-mail	<input type="checkbox"/> 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 \$ 500.00

Event Description: HBO Emmy Party Date(s) 9 / 17 / 17 9 / 17 / 17
Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: HBO
Name of Source

Was ticket distribution made at the behest of agency official? Yes No If yes: _____
Official's Name (Last, First)

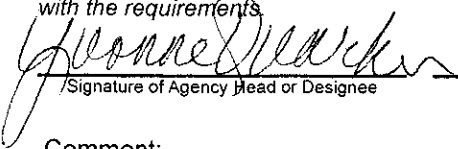
3. Recipients

* 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)/ Passes	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Heilman, John (Mayor)	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Ticket Policy - Section 5(A)
Horvath, Lindsey (Councilmember)	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Ticket Policy - Section 5(A)
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

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 <small>Print Name</small>	City Clerk <small>Title</small>	09/26/2017 <small>(month, day, year)</small>
Signature of Agency Head or Designee			

Comment: _____