

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

RECORDED - A Public Document

1. Agency Name City of El Cajon Division, Department, or Region <i>(if applicable)</i> Designated Agency Contact <i>(Name, Title)</i> Ryan Villegas, Ticket Administrator Designee, Management Analyst Area Code/Phone Number E-mail 619-441-6211 rvillegas@elcajon.gov		<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:60%; padding: 5px;"> Date Stamp EL CAJON 2021 NOV -1 P 1:50 </td> <td style="width:40%; padding: 5px; text-align: center;"> California Form 802 For Official Use Only </td> </tr> <tr> <td colspan="2" style="padding: 5px;"> <input type="checkbox"/> Amendment <i>(Must Provide Explanation in Part 3.)</i> </td> </tr> <tr> <td colspan="2" style="padding: 5px;"> Date of Original Filing: _____ <i>(month, day, year)</i> </td> </tr> </table>	Date Stamp EL CAJON 2021 NOV -1 P 1:50	California Form 802 For Official Use Only	<input type="checkbox"/> Amendment <i>(Must Provide Explanation in Part 3.)</i>		Date of Original Filing: _____ <i>(month, day, year)</i>	
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2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 55.00

Event Description: Sara Evans Date(s) 10 / 28 / 21
Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: Live Nation - The Magnolia
Name of Source

Was ticket distribution made at the behest of agency official? Yes No If yes: Graham Mitchell - City Manager
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:
David Richards & Spouse	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: 4(o) - Employment retention programs, such as drawings or raffles, which aim to support overall employee morale.
		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)/ 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.

Digitally signed by Ryan Villegas DN: cn=Ryan Villegas, o=US, c=City of El Cajon, ou=City Manager's Office, email=rvillegas@cityofelcajon.us Reason: I am approving this document Date: 2021.11.01 07:55:16 -0700 Villegas	Ryan Villegas Print Name	TAD, Management Analyst Title	11/1/21 (month, day, year)
Signature of Agency Head or Designee Print Name Title (month, day, year)			

Comment: _____