

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

A Public Document

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|--|--|---|
| 1. Agency Name City of El Cajon Division, Department, or Region (if applicable) Designated Agency Contact (Name, Title) Ryan Villegas, Ticket Administrator Designee, Management Analyst Area Code/Phone Number E-mail 619-441-6211 rvillegas@elcajon.gov | Date Stamp JUN 13 2012 10:08 AM EL CAJON CA | California Form 802 For Official Use Only <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 \$ 60.00

Event Description: (See comments below for full name) Date(s) 12 / 6 / 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: |
| Liz Pittsley & Spouse | 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> 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"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> |
| 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 |
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| | | |

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.

Ryan Villegas
TAD, Management Analyst

Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: Shawn Colvin, Marc Cohn, and Sara Watkins: Together in Concert