Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California City of El Cajon Form Division, Department, or Region (if applicable) For Official Use Only Designated Agency Contact (Name, Title) Ryan Villegas, Ticket Administrator Designee, Management Analyst Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: ... 619-441-6211 rvillegas@elcajon.gov (month, day, year) 2. Function or Event Information Does the agency have a ticket policy? Face Value of Each Ticket/Pass \$ 45.00 Yes⊠ No□ Event Description: Al Di Meola Date(s) __3__/_ 15 / Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? If no: Live Nation - The Magnolia Yes ☐ No 🛛 Name of Source If yes: Graham Mitchell - City Manager Was ticket distribution made at the behest Yes ☒ No ☐ Official's Name (Last, First) 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 organization. Number A. Name of Agency, Department or Unit Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ **Passes** Number Name of Individual В. of Ticket(s)/ Identify one of the following: (Last, First) Passes Ceremonial Role Other X Income __ Steven Raineri + Guest If checking "Ceremonial Rolo" or "Other" describe below: 2 4(o) - Employment retention programs, such as drawings or raffles, which aim to support overall employee morale, Ceremonial Role Other 🗌 Income If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization C. of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy (include address and description) Passes 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. TAD, Management Analyst Rvan Villegas Signature of Agency Head or Designee Print Name

Agency Report of:

Comment: _

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have read and understand FPPC Regulation	is 18944.1 and 18942. I ha	ve verified that the distribution set forth a	bove, is in accordance
ith the requirements.		44	3
1) Will I VI DAN	Ryan Villegas	TAD, Management Analyst	20 M DO
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)
Comment:			

Agency Name	e Events and Ticket			Date Stamp	A Public Document	
City of El Cajon					Form 802	
	nt, or Region (if applicable)				For Official Use Only	
Designated Agency	Contact (Name, Title)				ļ	
Ryan Villegas, Ticl	ket Administrator Designee,	Management A	nalyst	Amandanat (14	of Bookle Surface (by la Book A)	
Area Code/Phone N	lumber E-mail			Amendment (Must Provide Explanation in Part 3.)		
619-441-6211	rvillegas@elcajo	n.gov		Date of Original Filir	ng:(month, day, year)	
. Function or Eve	ent Information			Assistant Astronomy and the second and the second astronomy and the second astronomy and the second astronomy astronomy astronomy astronomy as a second as a sec	45.00	
Does the agency h	nave a ticket policy? Ye	es⊠ No⊟ F	ace Value of	Each Ticket/Pass \$	45.00	
Event Description:	Al Di Meola Provide Title/ Ex	volanation [oate(s) <u>3</u>	<u>/ 15 / 22</u>		
Ticket(s)/Pass(es)			no: Live Nati	on - The Magnolia		
, , , , .			Grahan	Name of Source	nager	
Was ticket distribu of agency official	tion made at the behest γ_{ϵ} ?	es⊠ No□ ^l	yes: Granan	n Mitchell - City Mai Official's Name (Last, Fi	iragei irst)	
		Number	a a spaleares	ten jakon kan engan ang kan dag katan	dentify an outside organization.	
	gency, Department or Unit		a a spaleares	ten jakon kan engan ang kan dag katan	dentify an outside organization. pursuant to the agency's policy	
A. Name of A		Number of Ticket(s)/	a a spaleares	ten jakon kan eren eren eta	pursuant to the agency's policy	
A. Name of A	gency, Department or Unit Name of Individual (Last, First)	Number of Ticket(s)/ Passes Number of Ticket(s)/	Cerei	Identify one of the monial Role (Corporate of the Corporate of the Corpora	pursuant to the agency's policy the following:	
A. Name of A	gency, Department or Unit Name of Individual (Last, First)	Number of Ticket(s)/ Passes Number of Ticket(s)/ Passes	Cerei If chec 4(o) - Emplo or raffles, W	Identify one of the common of	pursuant to the agency's policy the following: or	
B. Raul Armenta + C	gency, Department or Unit Name of Individual (Last, First)	Number of Ticket(s)/ Passes Number of Ticket(s)/ Passes	Cerei If check Cerei If check Cerei If check Cerei If check	Identify one of the montal Role (1) Other String "Ceremonial Role" or "Other String in the support of the string "Ceremonial Role" or "Other Role"	pursuant to the agency's policy the following: or	

Verification			
I have read and understand FPPC Regulation	ns 18944.1 and 18942. I hav	ve verified that the distribution set forth al	bove, is in accordance
with the requirements.			11/2/2
An allie	Ryan Villegas	TAD, Management Analyst	4166
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)
()			
Comment:			
******			CDDC Entry 902 (2/2046)

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions **A Public Document** 1. Agency Name California Date Stamp

	City of El Cajon Division, Department, or Regi	on (if applicable)		For Official Use Only		
	Designated Agency Contact (•				
	Ryan Villegas, Ticket Admin	anagement A	nalyst	Amendment (Must Pro	vide Explanation in Part 3.)	
	Area Code/Phone Number	E-mail			Date of Original Filing:	
	619-441-6211	rvillegas@elcajon.g	ov		Date of Original Filling.	(month, day, year)
2.	Function or Event Infor	mation			45	00
	Does the agency have a tick	ket policy? Yes ∑	No□ F	ace Value of	Each Ticket/Pass \$ 45.	<u> </u>
	Event Description: Al Di Me	ola	D	ate(s)3	<u>, 15 , 22 </u>	
		Provide Title/ Explan	ation			
	Ticket(s)/Pass(es) provided	by agency? Yes [on - The Magnolia Name of Source	
	Was ticket distribution made	at the behest Ves 7	n No⊟ If	yes: Grahan	n Mitchell - City Manage	: r
	of agency official?	169 [1 140 E	•	Official's Name (Last, First)	
3.	Recipients		(T C t T) 4 t	danetta an individ	Ingl. 4 The Coation C to identif	iv en outside organization
	Use Section A to identify the agen	cy s department or unit.	Number	1. J. J. 17 S. S. S.	THE REPORT OF THE PROPERTY OF THE	
	A. Name of Agency, Depart	artment or Unit	of Ticket(s)/ Passes	Describe th	ne public purpose made purs	uant to the agency's policy
	· And Annual Ann					
	*************************************		Number			
	B. Name of Ind (Last, Fit		of Ticket(s)/ Passes		Identify one of the fo	llowing:
	lool Marinether + Guest			Cerer	monial Role Other 🗵	Income _
	Joel Meriwether + Guest		2	If check	oking "Ceremonial Role" or "Other" desc Dyment retention progra	ribe below: ims_such as drawings
					hich aim to support ove	
				1	monial Role Other Chief Other Chief description of the Control of	Income cribe below:
	C Name of Outside C		Number of Ticket(s)/	Describe t	he public purpose made purs	uant to the agency's policy
	(include address and	a description)	Passes		en e	
_	Manifica Alam		<u> </u>	<u> </u>		
4.	Verification Thave read and understand Fl	DDC Begulations 1904A	1 and 18049	I have verified	that the distribution set fo	rth above is in accordance
and the same	- coave reao and undersiand i'il		. , anu 10342.	i nave venilleu	was the distribution set to	, ar above, is all accordance

4.	Ve	rific	ation

	Thave read and understand FPPC	Regulations 18944.1 and 18942.	. I have verified that the distribution set forth	above, is in accordance
	with the requirements	9		
1	T XMPY 100	Ryan Villegas	TAD, Management Analyst	
ı	Charles of Assessed Land on Decisions	Drint Mama	Title	(month day year)

Comment:

Agency Report of:

Ce	eremonial Role Ever	nts and Ticket/P	ass Distri	butions	,	A Public Document
1.	Agency Name				Date Stamp	California 802
	City of El Cajon					
	Division, Department, or Re	gion (if applicable)				For Official Use Only
	Designated Agency Contact	: (Name,Title)				·
	Ryan Villegas, Ticket Adm	inistrator Designee, M	anagement A	nalyst	Amendment (Mus)	f Provide Evolenation in Part 3.1
	Area Code/Phone Number	E-mail	Amendment (Must Provide Explanation in Part 3.)			
	619-441-6211	rvillegas@elcajon.g	jov		Date of Original Filing	g: (month, day, year)
2.	Function or Event Info	rmation				45.00
	Does the agency have a tie	cket policy? Yes [No□ F	ace Value of	Each Ticket/Pass \$.	45.00
	Event Description: Al Di M	eola Provide Title/ Explai	D	ate(s)3	1522	
	Ticket(s)/Pass(es) provide	· · · · · · · · · · · · · · · · · · ·		no: Live Nati	on - The Magnolia Name of Source	·
	Was ticket distribution mad	le at the behest Yes	NOT If	yes: Graham	n Mitchell - City Mana Official's Name (Last, Firs	ager
	of agency official?	100			Official's Name (Last, Firs	t)
3.	Recipients • Use Section A to identify the ag	ency's department or unit. •	Use Section B to i	dentify an individ	lual. • Use Section C to ide	entify an outside organization.
	A. Name of Agency, De	partment or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made p	oursuant to the agency's policy
	B. Name of In		Number of Ticket(s)/		Identify one of th	e following:
	(Last, F	-irst)	Passes		nonial Role Other	X Income [
>	Kellie Arredondo + Gues	t #5373	2	4(o) - Emplo	king "Ceremonial Role" or "Other" syment retention pro	
€*				Ceren	nonial Role Other king "Ceremonial Role" or "Other"	income [
	C. Name of Outside (include address a		Number of Ticket(s)/ Passes	Describe th	ne public purpose made p	oursuant to the agency's policy

4.	Verification I have read and understand I	FPPC Regulations 18944	.1 and 18942.	 have verified	that the distribution se	et forth above, is in accordance
eer land	with the requirements.	A Rya	n Villegas		AD, Management An	nalyst 3/14/a
	Signature of Agency Head or Des	ignae F	rint Name		Title	(mohth, day, year)