Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions	Į.	A Public Document
1. Agency Name	Date Stamp	California 802
City of El Cajon		Form OUZ
Division, Department, or Region (if applicable)		For Official Use Only

	y of El Cajon				4	Form 002
Div	ision, Department, or Reg	ion (if applicable)		For Official Use Only		
_						
	signated Agency Contact					
_	an VIIIegas, Ticket Admlr a Code/Phone Number	nistrator Designee, Mi E- mail	anagement A	nalyst	☐ Amendment (Must Pro	vide Explanation in Part 3.)
		1			Date of Original Filing:	
61	9-441-6211	rvillegas@elcajon.g	lov		Date of Original Family.	(month, day, year)
2. Fu	inction or Event Infor	mation				
Do	es the agency have a tic	ket policy? Yes [⊠ No□ F	ace Value of	Each Ticket/Pass \$ 35.	00
Ev	ent Description: Celebrat	ing Billy Joel)ate(s)9	<u>, 23 , 22</u>	
		Provide Title/ Explar	nation			
HC	ket(s)/Pass(es) provided	by agency? Yes L			on - The Magnolia Name of Source	-
Wa	as ticket distribution made	e at the behest Yes	No TI	yes: <u>Graham</u>	Mitchell - City Manage Official's Name (Last, First)	<u>r</u>
	agency official?	_			Official's Name (Last, First)	
	N					
	Recipients Use Section A to identify the ager	ncy's department or unit.	Use Section B to i	dentify an individ	lual. • Use Section C to identif	v an outside organization.
*****			Number			en jaron jaron 1965. Kanada kanada kanad
Α	Name of Agency, Dep	artment or Unit	of Ticket(s)/ Passes	Describe th	e public purpose made pursu	iant to the agency's policy
_						·
•						***************************************
_						
В			Number of Ticket(s)/		Identify one of the fol	lowing:
<u></u>	(Last, Fir	st) ARE	Passes			
Li	indsey Anderson & Gues	y	_		nonial Role Other 🗵 king "Ceremonial Role" or "Other" desci	Income Income
Χ_	~/		2	4(o) - Emplo	syment retention progra	ms, such as drawings
\subseteq	my you				hich aim to support over	
	(nonial Role 🔲 — Other 📙 king "Ceremonial Role" or "Other" descr	Income L ribe below:
-	Name of Outside O	rganization	Number	Harana da	energe neredikasirin og	
С	(include address and		of Ticket(s)/ Passes	Describe th	ie public purpose made pursi	lant to the agency's policy
4. Ve	rification					
	ave) read and understand FF	PPC Regulations 18944	.1 and 18942.	I have verified	that the distribution set for	th above, is in accordance
/ with	h the requirements.	OOR () Rvar				9/0/1/8
	V WIMI 1.11	/ <i>(100k /)</i> Rvar	n Villegas	ΤA	D, Management Analys	t 7/9//8

Signature of Agency Head or Designee

Print Name

(month, day, year)

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

1. Agency Name

A Public Document

_	ency Name				Date Stamp	California 802
	y of El Cajon	15 15 15 15 15 15 15 15 15 15 15 15 15 1				For Official Use Only
DIV	ision, Department, or Reg	on (if applicable)				
Des	signated Agency Contact (Name,Title)				
	an Villegas, Ticket Admin		anagement Ai	nalyst	Amendment (Must Pr	ovide Explanation in Part 3.)
Are	ea Code/Phone Number	E-mail				
61	9-441-6211	rvillegas@elcajon.g	ov		Date of Original Filing: _	(month, day, year)
Fu	ınction or Event Infor	mation			35	00
Do	es the agency have a ticl	ket policy? Yes [∑	No ☐ F	ace Value of I	Each Ticket/Pass \$ $\frac{35}{2}$.00
Εv	ent Description: Celebrat	ing Billy Joel	D	ate(s)9	, 23 , 22	
Tic	:ket(s)/Pass(es) provided	Provide Title/ Explan	^{ation}] No⊠] If	no. Live Nation	on - The Magnolia	
110	net(s)// ass(es) provided	by agonoy: 16s L			Name of Source	
	as ticket distribution made	at the behest Yes	9 No□ If	yes: Granam	Mitchell - City Manag Official's Name (Last, First)	er
O	f agency official?				, , ,	
F	Recipients					
	Use Section A to identify the agen	cy's department or unit. • 1	Use Section B to i	dentify an individ	lual. • Use Section C to ident	ify an outside organization.
Δ	\. Name of Agency, Depa	artment or Unit	Number of Ticket(s)/	Describe th	e public purpose made pur	suant to the agency's policy
_			Passes			
•						
E	3. Name of Ind (<i>Last, Fi</i> r		Number of Ticket(s)/ Passes		dentify one of the f	ollowing:
_	Chad Lou & Guest				nonial Role 🔲 Other 🗵	
,			2	If checking "Ceremonial Role" or "Other" describe below: 4(o) - Employment retention programs, such as drav		
_	Ched 2			 		erali employee morale.
					nonial Role Other Oher Manager Oher O	
					• • • • • • • • • • • • • • • • • • • •	
-	Name of Outside C	ranization	Number			
((include address and		of Ticket(s)/ Passes	Describe th	ne public purpose made pur	suant to the agency's policy
-						
_						
	erification					
	ave read and understand Fl th_the_requirements.	PPC Regulations 18944	.1 and 18942.	l have verified	that the distribution set for	orth above, is in accordance
VVI	A A .	00	n Villagaa	T /	ND Management Analy	vet 1/2/1/2/0
·	Signature of Agency Head in Desig		n Villegas		ND, Management Anal	(month, day, year)
С	omment:					

Comment: _

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document						
1. Agency Name	Date Stamp	California 802				
City of El Cajon		Form OUZ				
Division, Department, or Region (if applicable)		For Official Use Only				

City of El Cajon				For Official Use Only
Division, Department, or Region (if applicable		To Small Use Only		
Designated Agency Contact (Name, Title)				
Ryan Villegas, Ticket Administrator Desig	nee, Management A	nalyst	Amendment (Must Pro	ovide Explanation in Part 3.)
Area Code/Phone Number E-mail				, ,
619-441-6211 rvillegas@e	lcajon.gov		Date of Original Filing: _	(month, day, year)
Function or Event Information			25	00
Does the agency have a ticket policy?	Yes⊠ No□ F	ace Value of	Each Ticket/Pass \$ 35	.00
Event Description: Celebrating Billy Joel	C	ate(s)9	<u>/ 23 / 22 </u>	
Provide I	itle/ Explanation	no. Live Nati	on - The Magnolla	
Ticket(s)/Pass(es) provided by agency?			Name of Source	
Was ticket distribution made at the behes	t Yes⊠ No□ If	yes: <u>Grahan</u>	n Mitchell - City Manage Official's Name (Last, First)	er
of agency official?			Omorar a Harro (East, 1 not)	
Recipients • Use Section A to identify the agency's department of		identify an individ	lual. • Use Section C to identi	fy an outside organization.
A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe ti	ne public purpose made purs	suant to the agency's policy

		<u> </u>		
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes		Identify one of the fo	ollowing:
Judi Gonzalez & Guest) 2	If chec	monial Role Other oth	-
Sed, Domales		or raffles, w	hich aim to support ove	erall employee morale.
			monial Role Other Ching "Ceremonial Role" or "Other" des	
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe t	he public purpose made pur	suant to the agency's policy
A series of the	, doads	+00.40(34,040A		
. Verification I have read and understand FPPC Regulation	ne 180// 1 and 180//2	I have verified	that the distribution set fo	orth above, is in accordanc
with the requirements.	10 10077,1 WHO 10072.			1
(XX IVV DONIA)	Ryan Villegas	T	AD, Management Analy	yst 0 kg /2
Signature of Agency Head or Designed	Print Name		Title	(mohth, daly, year)

FPPC Form 802 (2/2016) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California Form City of El Cajon For Official Use Only Division, Department, or Region (if applicable) 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 Face Value of Each Ticket/Pass \$ 35,00 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Celebrating Billy Joel Date(s) __9__/_ 23 / Provide Title/ Explanation If no: Live Nation - The Magnolla Ticket(s)/Pass(es) provided by agency? 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 Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ Passes Number Identify one of the following: Name of Individual of Ticket(s)/ (Last, First) Passes Other 🗵 Ceremonial Role Ellena Holmes & Guest If checking "Ceremonial Role" or "Other" describe below: 2 4(o) - Employment retention programs, such as drawings or raffles, which aim to support overall employee morale. Income Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ (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.	. 1 /

Signature of Agency Head or Designee

Ryan VIIIegas Print Name TAD, Management Analyst

Itle

(month, day, year)

Comment:

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California Form City of El Cajon For Official Use Only Division, Department, or Region (if applicable) 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 Face Value of Each Ticket/Pass \$ 35.00 Does the agency have a ticket policy? Yes⊠ No 🗆 Event Description: Celebrating Billy Joel Date(s) ___9__/ 23 / Provide Title/ Explanation If no: Live Nation - The Magnolla Ticket(s)/Pass(es) provided by agency? 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 Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ Passes Number Name of Individual of Ticket(s)/ Identify one of the following: (Last, First) Passes Other X Ceremonial Role Dominic Mangiapane & Guest If checking "Ceremonial Role" or "Other" describe below: 2 4(o) - Employment retention programs, such as drawings or raffles, which aim to support overall employee morale. Other Income Ceremonial Role If checking "Geremonial Role" or "Other" describe below: Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy C. of Ticket(s)/ (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.

Ryan VIIIegas

Comment:

TAD. Management Analyst

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document Date Stamp California 1. Agency Name Form City of El Cajon For Official Use Only Division, Department, or Region (if applicable) Designated Agency Contact (Name, Title) Rvan 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 Face Value of Each Ticket/Pass \$ 35.00 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Celebrating Billy Joel 23 / Provide Title/ Explanation lf no: Live Nation - The Magnolia Ticket(s)/Pass(es) provided by agency? 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 Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ Passes Number Identify one of the following: Name of Individual of Ticket(s)/ (Last, First) Passes Other 🗵 Ceremonial Role Shanner \$tanley & Guest If checking "Ceremonial Role" 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 Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ C. (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 Ryan Villegas

Print Name

Comment:

Agency Report of:

-	-3	- 11-						
(Ceremoni	al	Ro	١le	Events	and	Ticket/Pass	Distributions

A Public Document

1.	Agency Name				Date Stamp	California 802
	City of El Cajon			Form 002		
	Division, Department, or Rec	gion (if applicable)		For Official Use Only		
	Designated Agency Contact	(Name,Title)				
	Ryan Villegas, Ticket Admi	nistrator Designee, M	anagement A	nalyst	Amandment (thirt)	Provide Explanation in Part 3.)
	Area Code/Phone Number	E-mail			Amendment (Musi F	тоуша Ехріапаноп іп Рап 3.)
	619-441-6211	rvillegas@elcajon.g	JOV		Date of Original Filing:	(month, day, year)
2.	Function or Event Info	rmation				
	Does the agency have a tic	ket policy? Yes	⊠ No□ F	ace Value of	Each Ticket/Pass \$ $\frac{3}{2}$	5.00
	Event Description: Celebra	ting Billy Joel			<u>, 23 , 22 </u>	1 1
	Event Description:	Provide Title/ Explar	nation			
	Ticket(s)/Pass(es) provided	l by agency? Yes [] No⊠ If	no: <u>Live Nati</u>	ion - The Magnolia	<u> </u>
	Mos tisket distribution mad	a at the behast ver	en — If	ves. Grahan	n Mitchell - City Manag	ger
	Was ticket distribution mad of agency official?	e at the beliest Yes E	고 No디 "	you	Official's Name (Last, First)	
	or agency official:					
3.	Recipients					
	• Use Section A to identify the age	ncy's department or unit. •	Use Section B to i	dentify an individ	dual. • Use Section C to iden	tify an outside organization.
	A. Name of Agency, Dep	partment or Unit	Number of Ticket(s)/ Passes	Describe th	ne public purpose made pu	rsuant to the agency's policy
			rasses	5 1, 11, 14, 14, 14, 15, 15	and the control of the set of the	
	R Name of Inc		Number			
	B. Name of Inc. (Last, F		of Ticket(s)/ Passes		identify one of the	ioliowing:
	Andrew Celiceo & Guest			Сегег	monial Role 🔲 💮 Other 🛭	
_	Andrew Gences & Guest		2	4(n) - Emple	cking "Ceremonial Role" or "Olher" d	escribe below: rams, such as drawlngs
	19/1					/erall employee morale.
S. P. S.					monial Role 🔲 Other [
				If chec	cking "Ceremonial Role" or "Other" d	escribe below:
	C Name of Outside		Number of Ticket(s)/	Describe ti	he public purpose made pu	rsuant to the agency's policy
	C. (Include address ar	id description)	Passes			
			ļ			
					•	
4.	Verification	·			,	
	l have read and understand F with the requirements.	PPC Regulations 18944	1.1 and 18942.	I have verified	that the distribution set	forth above, is in accordance
(wan the requirements.					10/10/22
`	J. J		n Villegas	<u></u>	AD, Management Ana	lyst U U U U U U U U U
	Signatule of Agency Head of Desi	Au o e L	THE NOTES		· (MO	i (months day, your)
	Comment:					

Agency Report of:

Ceremonial Role Events and Ticket/Pass Distributio	ns	

A Public Document

. Agency Name	Date Stamp California 802				
City of El Cajon		For Official Use Only			
Division, Department, or Region (if	applicable)		For Official Ose Office		
Designated Agency Contact (Name,	Title)				
Ryan Villegas, Ticket Administrat	or Designee, Ma	anagement A	nalyst	Anneadanna (46 - 17)	de Carles New York Devices
Area Code/Phone Number E-ma	il	-		Amendment (Must Pr	ovide Explanation in Part 3.)
619-441-6211 rville	egas@elcajon.g	ov		Date of Original Filing: _	(month, day, year)
2. Function or Event Information	on				
Does the agency have a ticket po	licy? Yes 🛚 🗡	3 No□ F	ace Value of	Each Ticket/Pass \$ $\frac{35}{2}$	5.00
Event Description: Celebrating B				<u>, 23 , 22 </u>	, .
Event Description:	Provide Title/ Explan	alion	rate(s)	<u> </u>	
Ticket(s)/Pass(es) provided by ag	· ·		no: Live Nati	on - The Magnolla	
			Graham	Name of Source	or
Was ticket distribution made at th	e behest Yes 🛚	No□ If	yes: Granan	Mitchell - City Manag Official's Name (Last, First)	CI
of agency official?					
Use Section A to identify the agency's de A. Name of Agency, Departmen		Use Section B to i Number of Ticket(s)/ Passes	Telescontrate Fills		ify an outside organization. suant to the agency's policy
B. Name of Individual (Last, First)		Number of Ticket(s)/ Passes		identify one of the f	ollowing:
Randy Soulard & Guest)	2	# chec 4(o) - Emplo		
			1	nonial Role Other king "Ceremonial Role" or "Other" de	
C. Name of Outside Organiz (include address and descr		Number of Ticket(s)/ Passes	Describe th	ne public purpose made pur	suant to the agency's policy
4. Verification					
I have read and understand FPPC R	egulations 18944.	.1 and 18942.	I have verified	that the distribution set fo	orth above, is in accordance
with the reguliernents.	Rvar	n Villegas	TA	AD, Management Analy	vst 10/10/22
Signature of Agency Head or Designee		rint Name		Title	(rhonth, day, year)
Comment:					

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

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	Agency Name				Date Stamp	California OOO
•	City of El Cajon		Buto otamp	Form 802		
	Division, Department, or Reg	ion (if applicable)	-	For Official Use Only		
	principal populations, or the	,				
	Designated Agency Contact	(Name, Title)				
	Ryan Villegas, Ticket Admir		anagement A	nalvst		
	Area Code/Phone Number	IE-mail			∐ Amendment (Must i	Provide Explanation in Part 3.)
	619-441-6211	rvillegas@elcajon.g	OV		Date of Original Filing:	(month, day, year)
			O V			(month, day, year)
2.	Function or Event Infor	mation			3	5 00
	Does the agency have a tick		3 No□ F	ace Value of	Each Ticket/Pass \$ $\frac{3}{2}$	
	Event Description: Celebrat	ting Billy Joel	D	ate(s)9	_/ 23 _/ 22	
		Provide Title/ Explan	ation			
	Ticket(s)/Pass(es) provided	by agency? Yes [] No⊠ lf	no: <u>Live Nau</u>	on - The Magnolia	
	Mag ticket distribution made	at the beheet war.	au m lf	ves. Graham	n Mitchell - City Mana	ger
	Was ticket distribution made of agency official?	a ar me nemear Yes N	л ио⊓ "	you	Official's Name (Last, First)	
	or agency official?					
3.	Recipients					
	* Use Section A to identify the age	ncy's department or unit. • 1	Use Section B to i	dentify an individ	lual. • Use Section C to ide	ntify an outside organization.
			Number	0		Harant to the agency's policy
	A. Name of Agency, Dep	artment or Unit	of Ticket(s)/ Passes	Describe tr	ie public purpose made pu	rsuant to the agency's policy
		· · · ·		†		
						W. Market and Control of the Control
			Number			
	B. Name of Ind (Last, Fi		of Ticket(s)/ Passes		identify one of the	following:
				Cerer	nonial Role Other	X Income
	Joseph Yeakey & Guest	4	2	If chec	king "Ceremonial Role" or "Other" o	fescribe below:
	Joseph Mail	hv	2			rams, such as drawings verall employee morale.
	- Brown all			1	monial Role Other	
					king "Ceremonial Role" or "Other" o	
	,					
			Number			
	C, Name of Outside C		of Ticket(s)/ Passes	Describe th	ne public purpose made pu	ursuant to the agency's policy
	ANNOUNCE CONTRACTOR OF THE CON		1 45555			
_			l			
4.	Verification					F. O. abases to to a considerate
	I have read and understand Fi	PPC Regulations 18944	.1 and 18942.	I have verified	that the distribution set	torth above, is in accordance
_	omiti dio requirements.	10:				11.10.
	1 LUME	V M Market Marke	n Villegas	T/	AD, Management Ana	alyst ///////
	Signature of Algency Head or Desig	Inee P	rint Name		FIUO	үнони, аау, уеаг)
	Comment.					

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California Form City of El Cajon For Official Use Only Division, Department, or Region (if applicable) 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 Face Value of Each Ticket/Pass \$ 35.00 Does the agency have a ticket policy? Yes 🛛 No 🗀 Event Description: Celebrating Billy Joel Date(s) __9__ / 23 / Provide Title/ Explanation If no: Live Nation - The Magnolia Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑ Name of Source 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 identify an identify an identify an individual. Use Section C to identify an outside organization. Number Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ Passes

B. Name of Individual (Last, First)	of Ticket(s)/ Passes	Identify one of the following:		
Lilia Calip & Guest	2	Ceremonial Role Other Melow: If checking "Ceremonial Role" or "Other" describe helow: 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:		
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		
Verification (2014)		13		
l have read and understand FPPC Redulations 18944	.1 and 18942.	I have verified that the distribution set forth above, is in accordance		

Ryan Villegas
Print Name

4.

with the requirements

Comment

TAD, Management Analyst

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California Form City of El Cajon For Official Use Only Division, Department, or Region (if applicable) 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 Face Value of Each Ticket/Pass \$ 35,00 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Celebrating Billy Joel Date(s) __9__/_ 23 , Provide Title/ Explanation If no: Live Nation - The Magnolia Ticket(s)/Pass(es) provided by agency? 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 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 of Ticket(s)/ Identify one of the following: (Last, First) Passes Other 🗵 Ceremonial Role Steven Zlp\$e & Guest If checking "Ceremonial Role" 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 "Geremonial Role" or "Other" describe below: Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy C. of Ticket(s)/ (include address and description) **Passes**

4. Verification

I have read and understand FPPC Reg	gulations 18944.1 and 18942. I have	verified that the distribution set forth	above, is in accordance
with the requirements.			9124122
Kamillien	m	""A "	Alage
1 UMMULLAS	Ryan Villegas	TAD, Management Analyst	11041
Signature of Agency Head or Designee	Print Name	Tille	(month day, year)