Agency Report of:

was inchited	JOIL OI.		
Ceremonial	Role Events	and Ticket/Page	Distributions

A Public Document

1.	Agency Name				Date Stamp	California 802		
	City of El Cajon	dam (is a unit a bia)		For Official Use Only				
	Division, Department, or Reg	vision, Department, or Region (if applicable)						
	Designated Agency Contact (Name, Title)							
	Ryan Villegas, Ticket Administrator Designee, Management Analyst			[] Amandmant (44(D.	At Code at a Code at			
	Area Code/Phone Number					Amendment (Must Provide Explanation in Part 3.)		
	619-441-6211	rvillegas@elcajon.g	yov		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 \$ 15.00							
	Event Description: Led Zepagain Date(s) 10 / 14 / 22							
	Provide Title/ Explanation							
	Ticket(s)/Pass(es) provided by agency? Yes □ No 図 If no: Live Nation - The Magnolia Name of Source							
	Was ticket distribution made	e at the behest Yes	Mitchell - City Manage Official's Name (Last, First)	er				
	of agency official?	100 [_		Official's Name (Last, First)			
3.	Recipients							
J,		ecipierus Se 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 of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy						
	A. Name of Agency, Dep	arthent of Othe	of Ticket(s)/ Passes	Describe (i)	la public purpose made purs	uant to the agency's policy		
			Number					
	B. Name of Ind (Last, Fi		of Ticket(s)/ Passes		Identify one of the fo	llowing:		
	Carson Cox & Guest				nonial Role 🔲 Other 🗵	Income		
	Ourson cox a cuest		2 4(0)	4(o) - Emplo	If checking "Ceremonial Role" or "Other" describe below: (o) - Employment retention programs, such as drawings			
2	antex				hich aim to support ove	rall employee morale.		
	C				nonial Role Other Other Marg "Ceremonial Role" or "Other" desc			
				n chec	ning determinations of dates desc	nibe below.		
	SANTA NAME OF TRANSPORT		Number					
	C. Name of Outside C		of Ticket(s)/ Passes	Describe th	ie public purpose made purs	uant 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 ac- with the requirements							
	12 1000 1111	De Rya	n Villegas	TΔ	ND, Management Analy	st 18/2/1/17		
	Signature of Agency Head or Desig		rint Name		Title	(month, day, year)		
	Comment:							