## **Agency Report of:** Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California City of El Caion 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 \$ Does the agency have a ticket policy? Yes X No □ Event Description: Pete Davidson 28 / Date(s) \_\_9\_/\_ 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 of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy A. Passes Number Name of Individual identify one of the following: В. of Ticket(s)/ (Last, First) Passes Other 🗵 Ceremonial Role Tracy Yale 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)/ 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 Signature of Agency Head or Designee Comment:

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document Date Stamp California 1. Agency Name 三语 所不见证 Form City of El Cajon For Official Use Only Division, Department, or Region (if applicable) 1023 UCT 10 A 9: 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: rvillegas@elcajon.gov 619-441-6211 (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 78.00 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Pete Davidson 28 / 9 / Date(s) \_\_ 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 Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ A. Passes Number Identify one of the following: Name of Individual of Ticket(s)/ В. (Last, First) **Passes** Other X Ceremonial Role Graham Mitchell 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 "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

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Agency Report of: **Ceremonial Role Events and Ticket/Pass Distributions** A Public Document 1. Agency Name Date Stamp California Form City of El Cajon DOFFIEL OF For Official Use Only Division, Department, or Region (if applicable) CLERK Designated Agency Contact (Name, Title) 2023 OCT Rvan Villegas, Ticket Administrator Designee, Management Analyst Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: rvillegas@elcajon.gov 619-441-6211 (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 78.00 Does the agency have a ticket policy? Yes⊠ No□ Event Description: Pete Davidson 9 28 / Date(s) \_ 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 Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ A. **Passes** Number Name of Individual Identify one of the following: В. of Ticket(s)/ (Last, First) Passes Ceremonial Role Other X Miranda James If checking "Ceremonial Role" or "Other" describe below: 2 4(b) - Promotion of City-controlled or sponsored events, activities, or programs Income ... Other 🔲 Ceremonial Role 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

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Ryan Villegas

TAD, Management Analyst

(thorth, 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 CEIVED OFFICE OF For Official Use Only Division, Department, or Region (if applicable) CITY CLERK EL CAJUN CA Designated Agency Contact (Name, Title) **20**23 OCT 10 Ryan Villegas, Ticket Administrator Designee, Management Analyst Amendment (Must Provide Explanation in Part 3.) E-mail Area Code/Phone Number Date of Original Filing: 619-441-6211 rvillegas@elcajon.gov (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 78.00 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Pete Davidson Date(s) \_\_\_9\_\_/ 28 / 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 A. 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 B. of Ticket(s)/ Identify one of the following: (Last, First) Passes Ceremonial Role Other X Andv Celiceø 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 "Ceremonial Role" or "Other" describe below:

4. Verification

C.

Name of Outside Organization

(include address and description)

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vith the requirements.			
And frillegas	Ryan Villegas	TAD, Management Analyst	10/10/23
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)
Comment:			

Number

of Ticket(s)/

Passes

Describe the public purpose made pursuant to the agency's policy

**Agency Report of:** Ceremonial Role Events and Ticket/Pass Distributions A Public Document Date Stamp California 1. Agency Name CHY CLEAR Form City of El Caion For Official Use Only Division, Department, or Region (if applicable) **20**23 OCT 10 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: rvillegas@elcajon.gov 619-441-6211 (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 78.00 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Pete Davidson 28 Date(s) \_\_9\_\_/\_ 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 Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ Name of Agency, Department or Unit A. Passes Number Identify one of the following: Name of Individual of Ticket(s)/ В. (Last, First) Passes Ceremonial Role Other X David Richards If checking "Ceremonial Role" or "Other" describe below: 1 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)/ C. (include address and description) Passes

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DIAMITOS	Ryan Villegas	TAD, Management Analyst	10/10/23
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)