

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

A Public Document

1. Agency Name City of Azusa Division, Department, or Region (if applicable) Administration Designated Agency Contact (Name, Title) Troy Butzlaff, ICMA-CM, City Manager Area Code/Phone Number E-mail 626-812-5238 tbutzlaff@ci.azusa.ca.us		AZUSA CITY CLERK Date Stamp 2017 JUN -6 P 1:23 California Form 802 For Official Use Only ☐ Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: <u>6/6/2017</u> (month, day, year)
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2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass \$ 100.00

Event Description: LA Dodgers vs Washington Nationals Date(s) 06 / 07 / 17
Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: Athens Services
Name of Source

Was ticket distribution made at the behest of agency official? Yes ☐ No ☒ If yes: _____
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
City of Azusa (Executive Team)	9	Staff Development
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role ☐ Other ☐ Income ☐ If checking "Ceremonial Role" or "Other" describe below:
		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

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.

 Signature of Agency Head or Designee	<u>Troy Butzlaff</u> Print Name	<u>City Manager</u> Title	<u>6/6/2017</u> (month, day, year)
Comment: _____			