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

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١.	Agency Name		Date Stamp	California Form 802						
	Division, Department, or Reg	ion (if applicable)		For Official Use Only						
	Designated Agency Contact	(Name, Title)								
	Area Code/Phone Number E-mail						Amendment (Must Provide Explanation in Part 3.) Date of Original Filing:			
<u>-</u>	Function or Event Infor	mation						(monur, day, year)		
	Does the agency have a ticket policy? Yes				Face	e Value of	Each Ticket/Pass \$ _			
	Event Description:				Date(s)					
	Ticket(s)/Pass(es) provided	by agency?	Yes	No	If no	:	Name of Source			
	Was ticket distribution made	No	If ye	s: ——						
	of agency official?				, -		Official's Name (Last, First)			
	A. Name of Agency, Department or Unit			Number of Ticket(s)/ Passes		Describe t	the public purpose made pursuant to the agency's policy			
	B. Name of Individual (Last, First)			Number of Ticket(s Passes		Identify one of the following:				
							Ceremonial Role Other Incom f checking "Ceremonial Role" or "Other" describe below:			
						Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below:				
		Name of Outside Organization (include address and description)		Number of Ticket(s)/ Descril Passes		Describe t	be the public purpose made pursuant to the agency's policy			
_	Verification									
-	I have read and understand FF with the requirements.	PPC Regulations	18944	.1 and 1894	42. I ha	ve verified	that the distribution set i	forth above, is in accordanc		
	Just ander	<u> </u>	Г.	int Norse			Title	(month dov.		
	Stgnature of Agency Head or Desig	nee	Pi	rint Name			Title	(month, day, year)		
	Comment:									