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

**A Public Document** 

1.	Agency Name			Annual Annua		Date Stamp	California 802		
	CITY OF SAN MARCOS					RECEIVED	Form For Official Use Only		
	Division, Department, or Region	on (If Applicabl	e)			MAR 0 8 2017	For Official Ose Offiny		
	Designated Agency Contact (Name, Title)					City Clerk Dept.			
	LORI WILCOX, DEPUTY CITY CLERK					City of San Marcos			
	Area Code/Phone Number   E-mail					Amendment (Must provide explanation in Part 3.)			
	(760) 744-1050	LWILCOX@	SAN-MARC	OS.NET		Date of Original Filing: _	(Month, Day, Year)		
2.	Function or Event Information						\$95.00		
	Does the agency have a ticket policy? Yes ☐ No ☐					of Each Ticket/Pass \$			
	Event Description Chamber of Commerce State of the City  Provide Title/Explanation  Date(s) 02 / 28 / 17								
	Ticket(s)/Pass(es) provided by	Yes□ No	Yes No If no:		Name of Source				
	Was ticket distribution made at the behest of agency official?		No ☐ Yes ☐ 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		Ticket(s)/ Describe the Pass(es)		he public purpose made pursuant to the agency's policy				
	B. Name of Individual		Number of Ticket(s)/ Pass(es)	Identify one of the following:					
	Schaller, Dave		1	Ceremonial Role  Other  Income  Income  Income  Public Purpose For Interdover.					
	Brindley, Karen			Ceremonial		Other	Income [		
			1	PUBLIC PURPOSE FOR INTERGOVERNMENTAL RELATIONS					
	C. Name of Outside Organization (include address and description)		Number of Ticket(s)/ Pass(es)	ket(s)/ Describe the		e public purpose made pursuant to the agency's policy			
		š							
4.	Verification  I have read and understand FPPC Regula	ations 18944.1 an	nd 18942. I have ve	erified that the distribution	on set f	forth above, is in accordance with	the requirements.		
	D		JACK GRI	FFIN		CITY MANAGER	3/2/2017		
	Signature of Agency Head or Designee		Print Nam	e		Title	(Month, Day, Year)		

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



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)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy					
B. Name of Individual	Number of Ticket(s)/ Pass(es)	Identify one of the following:					
Reynolds, Barry	1	Ceremonial Role					
Chafe, Jim	1	Ceremonial Role \( \overline{\overli					
		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)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy					