

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

A Public Document

<b>1. Agency Name</b> City of Murrieta Division, Department, or Region <i>(If Applicable)</i>  City Clerk Designated Agency Contact <i>(Name, Title)</i> Sarah Manwaring, City Clerk Area Code/Phone Number   E-mail 951-304-2489   smanwaring@murrieta.org		Date Stamp <b>RECEIVED</b>  APR 07 2015  <b>CITY OF MURRIETA CITY CLERK'S OFFICE</b> <input type="checkbox"/> Amendment <i>(Must provide explanation in Part 3.)</i> Date of Original Filing: _____ <i>(Month, Day, Year)</i>	<b>California Form 802</b> For Official Use Only
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**2. Function or Event Information**

Does the agency have a ticket policy?    Yes     No     Face Value of Each Ticket/Pass \$ \_\_\_\_\_ **10.00**

Event Description Aces Comedy Club Presents    Date(s) 03 / 12 / 15 \_\_\_\_\_  
*Provide Title/Explanation*

Ticket(s)/Pass(es) provided by agency?    Yes     No     If no: Aces Comedy Club  
*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	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy
Police Department	10	Policy Section IX(N) - Promoting enhanced city employee performance or morale.
B. Name of Individual <small>(Last, First)</small>	Number of Ticket(s)/ Pass(es)	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
C. Name of Outside Organization <small>(include address and description)</small>	Number of Ticket(s)/ Pass(es)	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.*

 <small>Signature of Agency Head or Designee</small>	Sarah Manwaring <small>Print Name</small>	City Clerk <small>Title</small>	04/07/2015 <small>(Month, Day, Year)</small>
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Comment: \_\_\_\_\_