

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

A Public Document

1. Agency Name		Date Stamp	California Form 802
City of Arcadia		For Official Use Only	
Division, Department, or Region (If Applicable)		OCT 31 2019	
City Manager's Office		CITY OF ALCADIA	
Designated Agency Contact (Name, Title)			
Dominic Lazzaretto, City Manager			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
626-574-5401	domlazz@ArcadiaCA.gov	Date of Original Filing: _____ (Month, Day, Year)	

2. Function or Event Information

Does the agency have a ticket policy?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Face Value of Each Ticket/Pass \$	10
Event Description	Santa Anita Race Track- Horse Racing Provide Title/Explanation		
Ticket(s)/Pass(es) provided by agency?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	If no:	Los Angeles Turf Club Name of Source
Was ticket distribution made at the behest of agency official?	No <input checked="" type="checkbox"/> Yes <input type="checkbox"/>	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	
B. Name of Individual (Last, First)	Number of Ticket(s)/ Pass(es)	Identify one of the following:	
Please see attached	12	Ceremonial Role <input checked="" type="checkbox"/> Other <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: Representation of City and Employee Morale	Income <input type="checkbox"/>
	12	Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:	Income <input type="checkbox"/>
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	

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.

	Dominic Lazzaretto	City Manager	10/31/19
Signature of Agency Head or Designee	Print Name	Title	(Month, Day, Year)

Comment: _____

		ticket	pass
Cara Wilhelm		10/2/2019	4
Jerry Moeller		10/2/2019	4
Sam Delgado		10/2/2019	4
Mike Salinas		10/2/2019	4
Ruben Ruiz		10/2/2019	4
Victor Castaneda		10/2/2019	4
Jesse Saucedo		10/2/2019	4
Benito Pelayo		10/2/2019	4
Eppie Melgoza		10/2/2019	4
Skip Bayhurs		10/2/2019	4
Kyle Taylor		10/2/2019	4
Xavier Bunuelos		10/2/2019	4
Travis Ring		10/7/2019	4
Rolando Gutierrez		10/10/2019	4
Mark Rey		10/10/2019	4
Sebastian Hernandez		10/10/2019	4
Amber Abeyta		10/15/2019	4
Anabel Carillo		10/17/2019	4
Jackie Mercado		10/17/2019	4
Bob Base		10/24/2019	4
		80	20