

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

A Public Document

1. Agency Name

City of Arcadia

Division, Department, or Region (If Applicable)

Designated Agency Contact (Name, Title)

Dominic Lazzaretto, City Manager

Area Code/Phone Number

626-574-5401

E-mail

domlazz@ArcadiaCa.gov

Date Stamp

MAR 6 2019

California Form

802

For Official Use Only

CITY OF ALCADIA
CITY OF ALCADIA

Amendment (Must provide explanation in Part 3.)

Date of Original Filing: _____
(Month, Day, Year)

2. Function or Event Information

Does the agency have a ticket policy? Yes No

Face Value of Each Ticket/Pass \$ _____ 10

Event Description Santa Anita Park - Horse Racing
Provide Title/Explanation

Date(s) 12 / 26 / 18 6 / 23 / 19

Ticket(s)/Pass(es) provided by agency? Yes No

If no: Los Angeles Turf 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		
B. Name of Individual (Last, First)	Number of Ticket(s)/ Pass(es)	Identify one of the following:		
Nermine Gerges Benito Pelayo	8	Ceremonial Role <input type="checkbox"/>	Other <input checked="" type="checkbox"/>	Income <input type="checkbox"/>
	8	If checking "Ceremonial Role" or "Other" describe below:	Representation of City, employee morale	
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.


Signature of Agency Head or Designee

Dominic Lazzaretto

Print Name

City Manager

Title

3-5-19

(Month, Day, Year)

Comment: _____