

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

A Public Document

1. Agency Name		Date Stamp	California Form 802
City of Arcadia		OCT 31 2019	
Division, Department, or Region (If Applicable)		For Official Use Only	
City Manager's Office		CITY OF ARCADIA	
Designated Agency Contact (Name, Title)		CITY OF ARCADIA	
Dominic Lazzaretto, City Manager		CITY OF ARCADIA	
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 \$	\$575 and \$675
Event Description	Breeders' Cup <small>Provide Title/Explanation</small>	Date(s)	11 / 1 / 19 11 / 2 / 19
Ticket(s)/Pass(es) provided by agency?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	If no:	Los Angeles Turf Club <small>Name of Source</small>
Was ticket distribution made at the behest of agency official?	No <input checked="" type="checkbox"/> Yes <input type="checkbox"/>	If yes:	<small>Official's Name (Last, First)</small>

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 <small>(Last, First)</small>	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"/>	Income <input type="checkbox"/>
		<i>If checking "Ceremonial Role" or "Other" describe below:</i>		
		Representation of City		
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.


Signature of Agency Head or Designee

Dominic Lazzaretto

Print Name

City Manager

Title

10/31/19

(Month, Day, Year)

Comment: _____

Breeders' Cup 2019

Friday, Nov. 1

\$575

Tom/Jeri Beck

Jason & Terra Kruckeberg

Roger Chandler

Dominic Lazzaretto

Saturday, Nov. 2

\$675

Roger Chandler

April Verlato & Chris Seymour

Dominic/Christine Lazzaretto

Gary Kovacic