

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

**A Public Document**

<b>1. Agency Name</b>		Date Stamp	California Form <b>802</b>
City of Arcadia Division, Department, or Region (If Applicable)		FER 4 2020	For Official Use Only
<b>Designated Agency Contact (Name, Title)</b>			
Dominic Lazzaretto, City Manager		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
Area Code/Phone Number 626-574-5401	E-mail 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 Tickets Provide Title/Explanation	
Ticket(s)/Pass(es) provided by agency?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	If no: Santa Anita Race Track 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.

<b>A. Name of Agency, Department or Unit</b>		Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy		
<b>B. Name of Individual (Last, First)</b>		Number of Ticket(s)/ Pass(es)	Identify one of the following:		
Please see attached		112	Ceremonial Role <input type="checkbox"/>	Other <input checked="" type="checkbox"/>	Income <input type="checkbox"/>
			If checking "Ceremonial Role" or "Other" describe below: Employee morale and city representation		
		112	Ceremonial Role <input type="checkbox"/>	Other <input type="checkbox"/>	Income <input type="checkbox"/>
			If checking "Ceremonial Role" or "Other" describe below:		
<b>C. Name of Outside Organization (Include address and description)</b>		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

2-3-2020

(Month, Day, Year)

Comment: \_\_\_\_\_

John Zurick	1/6/2020	4	1
Jeramie Brogan	1/6/2020	4	1
Phil Wray	1/6/2020	4	1
Jerry Moeller	1/13/2020	4	1
Sam Delgado	1/13/2020	4	1
Mike Salinas	1/13/2020	4	1
Ruben Ruiz	1/13/2020	4	1
Juan Calderon	1/13/2020	4	1
Rolando Gutierrez	1/13/2020	4	1
Jesse Saucedo	1/13/2020	4	1
Kyle Taylor	1/13/2020	4	1
Benito Pelayo	1/13/2020	4	1
Sebastian Hernandez	1/13/2020	4	1
Mark Rey	1/13/2020	4	1
Xavier Banuelos	1/13/2020	4	1
Eppie Melgoza	1/13/2020	4	1
Sammy Saldona	1/13/2020	4	1
Skip Bayhurst	1/13/2020	4	1
Victor Casteneda	1/13/2020	4	1
Helio Altamirano	1/13/2020	4	1
Amber Abeyta	1/20/2020	4	1
Christy Villa	1/21/2020	4	1
Anne Woo	1/21/2020	4	1
Danny Parker	1/21/2020	4	1
Kris Garcia	1/24/2020	4	1
Jacob Morua	1/24/2020	4	1
Phil Pierce	1/24/2020	4	1
Vincent Ho	1/27/2020	4	1