

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)		RECEIVED Date Stamp AUG 24 2026 CITY OF ARCADIA CITY CLERK	California Form 802 For Official Use Only
Designated Agency Contact (Name, Title) Dominic Lazzaretto, City Manager			
Area Code/Phone Number 626-574-5401	E-mail domlazz@ArcadiaCA.gov	☐ 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 \$ _____ 100

Event Description Pasadena Pops Concert Series Date(s) 08 / 15 / 26 08 / 2 / 26
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: Pasadena Symphony and Pops
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:
Anabel Carrillo & Maxine Morishita	10	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below: City representation and employee morale
		Ceremonial Role ☐ Other ☐ Income ☐ If checking "Ceremonial Role" or "Other" describe below:
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	8/20/2026 (Month, Day, Year)
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Comment: _____

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)