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

A Public Document

California Form 802
For Official Use Only

Date Stamp

1. Agency Name

CITY OF ANAHEIM

Division, Department, or Region *(If Applicable)*

CITY MANAGER'S OFFICE

Designated Agency Contact *(Name, Title)*

BOB WINGENROTH, TICKET ADMINISTRATOR

Area Code/Phone Number	E-mail
714-765-5165	BWINGENROTH@ANAHEIM.NET

☐ **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 $ 35.00

Event Description: Reception Honoring OC Olympic Athletes
Provide Title/Explanation

Date(s): 04 / 28 / 12 ___/___/___

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

If no: Orange County Forum
Name of Source

Was ticket distribution made at the behest of agency official? No ☐ Yes ☒

If yes: Wingenroth, Bob - Acting City Manager
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
PUBLIC INFORMATION	2	5.3.c - Economic/Business Development on behalf of City.

B. Name of Individual (Last, First)	Number of Ticket(s)/ Pass(es)	Identify one of the following:
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*
		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

[redacted] *s 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.*

Bob Wingenroth	Ticket Administrator	5-24-12
Print Name	*Title*	*(Month, Day, Year)*

Comment: _____