

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

A Public Document

<b>1. Agency Name</b>		Date Stamp	<b>California Form 802</b> For Official Use Only
City of Anaheim			
Division, Department, or Region (If Applicable)		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: _____ (Month, Day, Year)	
Designated Agency Contact (Name, Title)			
Amanda Sudduth, Ticket Administor Designee			
Area Code/Phone Number	E-mail		
714-765-8993	asudduth@anaheim.net		

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes     No     Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 225.00

Event Description Angels vs. Diamondbacks    Date(s) 06 / 15 / 12  
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency?    Yes     No     If no: \_\_\_\_\_  
Name of Source

Was ticket distribution made at the behest of agency official?    No     Yes     If yes: Murray, Kris, Council Member  
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.</b> Name of Agency, Department or Unit	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
<b>B.</b> Name of Individual (Last, First)	Number of Ticket(s)/Pass(es)	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:
<b>C.</b> 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
Katella HS, Chpt FHA-HERO - Non-Profit 2200 E. Wagner Ave., Anaheim 92806	4	5.3(f) Supporting or showing appreciation for prgms or services rendered by non-profit organizations benefiting Anaheim Resident

I have verified that the distribution set forth above, is in accordance with the requirements.  
**Amanda Sudduth**    TAD    TAD    06/15/12  
 Amanda Sudduth    Title    (Month, Day, Year)