

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

A Public Document

1. Agency Name	Date Stamp	California Form 802 <small>For Official Use Only</small>
CITY OF ANAHEIM		
Division, Department, or Region (if applicable)		
Street Address		
200 S. ANAHEIM BLVD., ANAHEIM, CA 92805		
Designated Agency Contact (Name, Title)	<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
AMANDA SUDDUTH, TICKET ADMINISTRATOR DESIGNEE	Date of Original Filing: _____ <small>(month, day, year)</small>	
Area Code/Phone Number	E-mail	
714-765-8993	ASUDDUTH@ANAHEIM.NET	

2. Function, Event, or Ceremonial Role Information

Title Anaheim Angels Baseball Game Face Value of Each Admission \$ 225.00

Description Tickets Date(s) 06 / 19 / 12

Ticket(s)/Admission(s) provided by agency? Yes No If no: Angel Stadium of Anaheim
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes No If yes: Eastman, Gail - Council Member
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	<ul style="list-style-type: none"> • Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.
Women's Division of the Anaheim Chamber of Commerce, 201 E. Center St., Anaheim, CA 92805 (non-profit)	4	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	5.3.f-Supporting services rendered by non-profit organization benefiting Anaheim residents. Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>

3. Verification
I have verified that the distribution of admissions, set forth above, complies with regulations 18944.1 and 18942.

Amanda Sudduth
AMANDA SUDDUTH

Print Name

TAD
TICKET ADMINISTRATOR

Title

06/19/12
(month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)