

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

A Public Document

1. Agency Name City of Anaheim Division, Department, or Region (If Applicable)		Date Stamp	California Form 802 For Official Use Only
Designated Agency Contact (Name, Title) Amanda Sudduth, Ticket Administor Designee		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: _____ (Month, Day, Year)	
Area Code/Phone Number 714-765-8993	E-mail 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. Giants Date(s) 06 / 19 / 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.

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:
Franks, John	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: g) Encouraging or rewarding significant academic, athletic, or public service achievements by Anaheim Students, residents...
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> 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. _____

I have verified that the distribution set forth above, is in accordance with the requirements.

Amanda Sudduth **TAD** 06/19/12
 Amanda Sudduth _____ Title _____
 Signature of Agency Head or Designee Print Name (Month, Day, Year)