

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

**A Public Document**

<b>1. Agency Name</b> CITY OF ANAHEIM		Date Stamp	<b>California Form 802</b>
Division, Department, or Region (if applicable)			For Official Use Only
Street Address 200 S. ANAHEIM BLVD., ANAHEIM, CA 92805			
Designated Agency Contact (Name, Title) AMANDA SUDDUTH, TICKET ADMINISTRATOR DESIGNEE		<input type="checkbox"/> <b>Amendment</b> (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, Event, or Ceremonial Role Information**

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

Description Tickets Date(s) 05 / 04 / 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: Tait, Tom - Mayor  
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	• 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.
The Anaheim Orange County Visitor and Convention Bureau, 800 W. Katella Avenue, Anaheim CA, 92802 (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. <span style="float:right">Income <input type="checkbox"/></span>
		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 FPPC Regulations 18944.1 and 18942.

\_\_\_\_\_ AMANDA SUDDUTH \_\_\_\_\_ TICKET ADMINISTRATOR 5-4-12  
Designee Print Name Title (month, day, year)

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