

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

**A Public Document**

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

**2. Function, Event, or Ceremonial Role Information**

Title Angel Baseball Game Face Value of Each Admission \$ 125/10-Parking

Description Tickets Date(s) 06 / 03 / 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: Wingenroth, Bob - Acting City Manager  
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"> <li>• 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.</li> <li>• If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.</li> </ul>	
Special Olympics of Orange County 550 N. Parkcenter Dr., #102, Santa Ana (non-profit)	4	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	5.3.f - Supporting and/or showing appreciation for programs/services rendered by non-profit organizations	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"/>

I certify that I am the Agency Official responsible for the distribution of admissions, set forth above, and that I am not a Public Official under PC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is for a public purpose.

**Amanda Sudduth**  
AMANDA SUDDUTH  
e \_\_\_\_\_  
Print Name

TICKET ADMINISTRATOR DESIGNEE  
TAD \_\_\_\_\_  
Title

06/03/12  
(month, day, year)

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