

**Tickets Provided by Agency Report**

**A Public Document**

TICKETS PROVIDED BY AGENCY REPORT

<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)			
Street Address			
200 S. Anaheim Blvd.			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	
714-765-8993	asudduth@anaheim.net		
Agency Contact (name and title)			
Amanda Sudduth (Ticket Administrator Designee)			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 5 / 2 / 12 Description of Event: Angels vs. Minnesota Twins

Face Value of Ticket: \$ \$225 each

Agency Event  Yes  No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Angels Stadium

Number of Tickets Received: \_\_\_\_\_ Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Lorri Galloway

Name of Individual or Organization: Lizette Valencia Number of Tickets: 2-suite

Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
5.3.e Attracting or rewarding volunteer public service

**5. Signature**

\_\_\_\_\_ of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.2.

Amanda Sudduth TAD 5.2-12  
Print Name Title (month, day, year)

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