

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

A Public Document

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

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 225.00suite/110.00club

Event Description Angels vs. New York Yankees Date(s) 5 / 28 / 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: _____
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 <small>(Last, First)</small>	Number of Ticket(s)/Pass(es)	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
C. Name of Outside Organization <small>(include address and description)</small>	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
The Eli Home	4-suite	5.3.e Attracting or rewarding volunteer public service
The Eli Home	2-club	5.3.e Attracting or rewarding volunteer public service

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

Amanda Sudduth

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TAD

TAD

05/28/12

nee

Print Name

Title

(Month, Day, Year)

Comment: _____