

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

A Public Document

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

2. Function, Event, or Ceremonial Role Information

Title Angels vs. Athletics Face Value of Each Admission \$ 225.00

Description Baseball Game Date(s) 05 / 14 / 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: Murray, Kris - Council Member
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"> 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. 	Income
Zion Lutheran School Age Care - Non-Profit 1244 W. Cypress Street, Anaheim, CA 92805	4	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	5.3.f-Supporting services rendered by non-profit organization benefiting Anaheim residents.	<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 have verified that the distribution of admissions, set forth above, complies with regulations 18944.1 and 18942.

AMANDA SUDDUTH

TICKET ADMINISTRATOR

5-14-12
(month, day, year)

Print Name

Title

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