

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

A Public Document

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
City of Fresno			
Division, Department, or Region (if applicable)			
Facilities & Major Projects			
Street Address			
2101 "G" Street, Building A, Fresno, CA 93706			
Designated Agency Contact (Name, Title)		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
Tina Your, Senior Account Clerk		Date of Original Filing: _____ (month, day, year)	
Area Code/Phone Number	E-mail		
559-621-1487	FacilitiesMgmt@Fresno.gov		

2. Function, Event, or Ceremonial Role Information

Title Fresno Grizzlies Baseball Face Value of Each Admission \$ 376.00

Description Sky Box Tickets Date(s) 04 / 17 / 12

Ticket(s)/Admission(s) provided by agency? Yes No If no: Fresno Baseball, LLC
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes No If yes: Westerlund, Larry Councilmember District 4
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.
Graffiti Abatement Jet Lim 2101 G Street, Fresno, CA	12	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Job well done - city department 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"/>

3. Verification



I have verified that the distribution of admissions, set forth above,

Nicole DeMera Chief of Staff 4/16/12
Print Name Title (month, day, year)

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

Appreciation - Thank you