

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

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CITY OF PALM SPRINGS

A Public Document

1. Agency Name		Date Stamp	California Form 802
City of Palm Springs		2012 MAR 27 AM 10:38	For Official Use Only
Division, Department, or Region (if applicable)		JAMES THOMPSON CITY CLERK	
Street Address		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
3200 E. Tahquitz Canyon Way, Palm Springs CA 92262			
Designated Agency Contact (Name, Title)		Date of Original Filing: _____ (month, day, year)	
Jennifer Nelson - Executive Assistant to Mayor/Council			
Area Code/Phone Number	E-mail		
760-322-8366	jennifer.nelson@palmspringsca.gov		

2. Function, Event, or Ceremonial Role Information

Title Rockin'VIP Challenge Face Value of Each Admission \$ 125.00

Description Fundraising dinner -United Way Date(s) 03 / 23 / 2012

Ticket(s)/Admission(s) provided by agency? Yes No If no: United Way of the Desert
Name of Source

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

Yes No If yes: _____
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.
Thomas Nolan, City Staff	2	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Income <input type="checkbox"/> <u>Public Purpose defined by Resolution</u> <input checked="" type="checkbox"/> 22454
		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,

David H. Ready City Manager 03/26/12
Print Name Title (month, day, year)

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