

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

A Public Document

1. Agency Name CITY OF SAN MARCOS		RECEIVED Date Stamp FEB 16 2012 CITY OF SAN MARCOS CITY CLERK DEPT	California Form 802 For Official Use Only
Division, Department, or Region (if applicable)			
Street Address 1 CIVIC CENTER DRIVE, SAN MARCOS CA 92069		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: _____ (month, day, year)	
Designated Agency Contact (Name, Title) Melinda Cogle, Administration			
Area Code/Phone Number 760/744-1050	E-mail mcogle@san-marcos.net		

2. Function, Event, or Ceremonial Role Information

Title CSUSM Community Report Face Value of Each Admission \$ 25.00

Description Annual Report to the Community Date(s) 02 / 02 / 12

Ticket(s)/Admission(s) provided by agency? Yes No If no: _____
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. 	
DESMOND, JIM	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Public purpose for intergovernmental relations	Income <input type="checkbox"/>
MARTIN, HAL	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Public purpose for intergovernmental relations	Income <input type="checkbox"/>
ORLANDO, CHRIS	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Public purpose for intergovernmental relations	Income <input type="checkbox"/>
JONES, REBECCA	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Public purpose for intergovernmental relations	Income <input type="checkbox"/>
JABARA, KRISTAL	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Public purpose for intergovernmental relations	Income <input type="checkbox"/>



_____ regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above,
 Paul Malone City Manager 02/15/2012
Print Name Title (month, day, year)

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