

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

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1. Agency Name County of San Diego Division, Department, or Region (if applicable) Board of Supervisors Street Address 1600 Pacific Hwy., Rm. 335, San Diego, CA 92101 Designated Agency Contact (Name, Title) Marisol Eaton, Office Manager/Scheduler Area Code/Phone Number E-mail 619-531-5555 marisol.eaton@sdcounty.ca.gov		<div style="text-align: right; font-weight: bold; font-size: 1.2em;">California Form 802</div> <div style="text-align: center; font-size: 0.8em;">For Official Use Only</div> <div style="text-align: center; margin-top: 20px;"> <input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: _____ <small>(month, day, year)</small> </div>
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2. Function, Event, or Ceremonial Role Information

Title Fallbrook Chamber Annual Awards Face Value of Each Admission \$ 62.50

Description Annual Awards & Installation of Officers Date(s) 01 / 28 / 2012 01 / 28 / 2012

Ticket(s)/Admission(s) provided by agency? Yes No If no: Fallbrook Chamber
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. 	
Horn, William	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Installed Officers and presented Certificates	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 read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above,

pan M. Wonsley Chief of Staff 3/12/12
Print Name Title (month, day, year)

(Do not include any additional information including amendment explanation.)