Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

A Public Document

California Form 802

For Official Use Only

Date Stamp

☐ **Amendment** *(Must provide explanation in Part 3.)*

Date of Original Filing: _____ *(Month, Day, Year)*

1. Agency Name

City of Folsom

Division, Department, or Region *(If Applicable)*

Environmental and Water Resources

Designated Agency Contact *(Name, Title)*

Mike Kashiwagi, Interim Environmental and Water Resources Director

Area Code/Phone Number	E-mail
916-355-3573	mkashiwagi@folsom.ca.us

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐

Face Value of Each Ticket/Pass $ 695.00

Event Description Assoc of CA Water Agencies 2013 Conf *Provide Title/Explanation*

Date(s) 05 / 07 / 13 05 / 10 / 13

Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐

If no: _____ *Name of Source*

Was ticket distribution made at the behest of agency official? No ☒ Yes ☐

If yes: _____ *Official's Name (Last, First)*

3. Recipients

• **Use Section A to identify the agency's department or unit.** • **Use Section B to identify an individual.** • **Use Section C to identify an outside organization.**

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy
City of Folsom Environmental and Water Resources	1	Information gathering and education regarding matters of local, regional and statewide key water issues and the City of Folsom

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Pass(es)	Identify one of the following:
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*

C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy

4. Verification

I have re[redacted]44.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Si[redacted]	Evert W. Palmer	City Manager	05/21/13
	Print Name	*Title*	*(Month, Day, Year)*

Comment: _____