

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

A Public Document

1. Agency Name City of Anaheim Division, Department, or Region (If Applicable)		Date Stamp	California Form 802 For Official Use Only
Designated Agency Contact (Name, Title) Amanda Sudduth, Ticket Administor Designee		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
Area Code/Phone Number 714-765-8993	E-mail asudduth@anaheim.net	Date of Original Filing: _____ (Month, Day, Year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 180 ~~110.00~~

Event Description Ducks Hockey Playoff Game #5 Date(s) 04 / 25 / 14
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: Honda Center of Anaheim
Name of Source

Was ticket distribution made at the behest of agency official? No Yes If yes: Eastman, Gail
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 spolcyy
B. Name of Individual <small>(Last-First)</small>	Number of Ticket(s)/Pass(es)	Identify one of the following:
Eastman, CJ	4	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below.</small> h) Attracting and retaining highly qualified employees in City service, for which such employee may receive no more than four (4) tickets per event.
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below.</small>
C. Name of Outside Organization <small>(include address and description)</small>	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy

4. Verification

I have read Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

	Amanda Sudduth	TAD	<u>4.25.14</u>
Signature of Agency Head or Designee	Print Name	Title	(Month, Day, Year)