

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

A Public Document

1. Agency Name		Date Stamp	California Form 802
City of Indio			For Official Use Only
Division, Department, or Region <i>(If Applicable)</i>			
Community Services			
Designated Agency Contact <i>(Name, Title)</i>		<input type="checkbox"/> Amendment <i>(Must provide explanation in Part 3.)</i> Date of Original Filing: _____ <small><i>(Month, Day, Year)</i></small>	
Jim Curtis, Community Services Manager			
Area Code/Phone Number	E-mail		
760-391-4174	jcurtis@indio.org		

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ _____ 799

Event Description 2014 Stagecoach Music Festival Date(s) 04 / 25 / 14 04 / 27 / 14
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: Goldenvoice, LLC
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
see attached list	15	Production wristbands for working staff
see attached list	10	Support local festival
B. Name of Individual <small><i>(Last, First)</i></small>	Number of Ticket(s)/Pass(es)	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small><i>If checking "Ceremonial Role" or "Other" describe below.</i></small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small><i>If checking "Ceremonial Role" or "Other" describe below.</i></small>
C. Name of Outside Organization <small><i>(include address and description)</i></small>	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy

4. Verification

I have verified that the distribution set forth above, is in accordance with the requirements.

	Jim Curtis	Community Services Manager	5/22/14
	<small><i>Print Name</i></small>	<small><i>Title</i></small>	<small><i>(Month, Day, Year)</i></small>

2014 Stagecoach Ticket Distribution

# of tickets	Name	Type of ticket	Days	Description
7	City of Indio - Building and Safety	production-fabric	all	Policy #2012-81512 G/h
5	City of Indio - PW	production-fabric	all	Policy #2012-81512 G/h
1	City of Indio - IWA	production-fabric	all	Policy #2012-81512 G/h
1	City of Indio - Community Services	production-fabric	all	Policy #2012-81512 G/h
2	Councilmember Lupe Ramos Watson	Guest	all	Policy #2012-81512 G/a
1	Councilmember Lupe Ramos Watson	A parking	all	Policy #2012-81512 G/a
2	Councilmember Elaine Holmes	Guest	all	Policy #2012-81512 G/a
1	Councilmember Elaine Holmes	A parking	all	Policy #2012-81512 G/a
2	Mayor Mike Wilson	Guest	all	Policy #2012-81512 G/a
1	Mayor Mike Wilson	A parking	all	Policy #2012-81512 G/a
2	Mayor Pro Tem Sam Torres	Guest	all	Policy #2012-81512 G/a
1	Mayor Pro Tem Sam Torres	A parking	all	Policy #2012-81512 G/a
2	City of Indio - Jason Chan	Guest	all	Policy #2012-81512 G/h
1	City of Indio - Jason Chan	A parking	all	Policy #2012-81512 G/h
2	unused	production-fabric	all	