

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

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A Public Document

1. Agency Name

City of Pomona

Division, Department, or Region (If Applicable)

Designated Agency Contact (Name, Title)

Linda Lowry, City Manager

Area Code/Phone Number

909-620-3773

E-mail

linda_lowry@ci.pomona.ca.us

Date Stamp

California Form **802**

For Official Use Only

Amendment (Must provide explanation in Part 3.)

Date of Original Filing: 09/22/2014

(Month, Day, Year)

2. Function or Event Information

Does the agency have a ticket policy? Yes No

Face Value of Each Ticket/Pass \$ 175.00

Event Description Dog Leg Classic Golf Tournament
Provide Title/Explanation

Date(s) 09 / 22 / 14

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

If no: Inland Valley Humane Society
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
B. Name of Individual (Last, First)	Number of Ticket(s)/ Pass(es)	Identify one of the following:
SEE PAGE 2		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
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, (d)(5) 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

(d)(5)

Linda Lowry

Print Name

City Manager

Title

9/22/14
(Month, Day, Year)

Comment: _____

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

Agency Name
City of Pomona

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
B. Name of Individual <small>(Last, First)</small>	Number of Ticket(s)/ Pass(es)	Identify one of the following:
Gluba, Mark	1	Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
Lazzaretto, Mark	1	Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
Dimalanta, Richie	1	Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
Guerrero, Rene	1	Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
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