

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

A Public Document

<b>1. Agency Name</b> City of Sacramento		Date Stamp	<b>California Form 802</b> For Official Use Only
Division, Department, or Region (If Applicable) Mayor/City Council		RECEIVED MAYOR/COUNCIL OFFICE CITY OF SACRAMENTO	
Designated Agency Contact (Name, Title) Aubrie Fong		JUN 19 2014	
Area Code/Phone Number 916-808-7006	E-mail afong@cityofsacramento.org	<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: _____ <small>(Month, Day, Year)</small>	

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes     No     Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 300

Event Description Greater Sac Urban League Unity Ball    Date(s) 6 / 26 / 14  
Provide Title/Explanation

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: McCarty, Kevin  
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 <small>(Last, First)</small>	Number of Ticket(s)/Pass(es)	Identify one of the following:
McCarty, Kevin	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Promote cultural, recreational and educational facilities, services & programs available to the public w/in the City of Sacramento.
	1	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 and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

_____ <small>Signature</small>	_____ Aubrie Fong <small>Print Name</small>	_____ Executive Assistant <small>Title</small>	_____ 6/19/14 <small>(Month, Day, Year)</small>
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