

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

A Public Document

1. Agency Name

City of Sacramento
 Division, Department, or Region *(If Applicable)*
 City Council District 1
 Designated Agency Contact *(Name, Title)*
 Rachel Minnick, District Director
 Area Code/Phone Number | E-mail
 916-808-7339 | rminnick@cityofsacramento.org

RECEIVED
 Date Stamp
 MAYOR/COUNCIL OFFICE
 CITY OF SACRAMENTO
 JUL 29 2014

California Form 802
 For Official Use Only

Amendment *(Must provide explanation in Part 3.)*
 Date of Original Filing: 7/29/14
(Month, Day, Year)

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 300
 Event Description 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: Ashby, Angelique
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 Council District 1 Staff	1	Promote services and programs available to the public within the City of Sacramento.
B. Name of Individual <i>(Last, First)</i>	Number of Ticket(s)/Pass(es)	Identify one of the following:
Minnick, Michael	1	Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i> Promote services and programs available to the public within the City of Sacramento.
		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 <i>(include address and description)</i>	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy

4. Verification

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


 Signature of Agency Head or Designee

Rachel Minnick
 Print Name

District Director
 Title

7/29/14
 (Month, Day, Year)

Comment: _____