Agency Report of:

Comment: _

Ceremonial Role Events and Ticket/Pass Distributions

. Agency Name			Date Stamp	California 802
City of Lancaster				
Division, Department, or Region (If Applica	ble)			For Official Use Only
			MAY13'16PM12	0:46-CLERK
Designated Agency Contact (Name, Title)			1	
Britt Avrit, City Clerk	Britt Avrit, City Clerk			
Area Code/Phone Number E-mail			☐ Amendment (Must p	rovide explanation in Part 3.)
661-723-6020 bavrit@cit	yoflancasterca	a.org	Date of Original Filing:	(Month, Day, Year)
. Function or Event Information				
Does the agency have a ticket policy?	Yes⊠ No	☐ Face Value	of Each Ticket/Pass \$ _	24
LPAC event			23 , 16	
Event Description LPAC event Provide Title/E.	xplanation	Date(s)		
Ticket(s)/Pass(es) provided by agency?	Yes⊠ No	□ If no:	Name of So	
	1C2 [M]		Name of So	urce
Was ticket distribution made at the behest	No ⊠ Yes	☐ If yes:	Official's Name (i	F-4 F-0
of agency official?			Official's Name (i	Last, First)
. Recipients				are an autota and are
Use Section A to identify the agency's department	or unit. • Use Sec	ction B to identify an individ	ual. • Use Section C to iden	tiry an outside organization.
A. Name of Agency, Department or Unit	Ticket(s)/ Pass(es)	Describe the pu	blic purpose made pursuant	to the agency's policy
	F ass(es)			
B. Name of Individual	Number of Ticket(s)		Identify one of the follow	ing:
B. Name of Individual		Ceremonial Role		
B. Name of Individual (Last, First) Crist, Marvin	Ticket(s)/ Pass(es)	Ceremonial Role If checking °Ceremo		
(Last, First)	Ticket(s)/	1	Other IX nial Role" or "Other" describe below:	
(Last, First)	Ticket(s)/ Pass(es)	If checking °Ceremo	Other Maniel Role" or "Other" describe below: 0-03 (h)	
(Last, First)	Ticket(s)/ Pass(es)	If checking *Ceremo Per Policy No. 100 Ceremonial Role	Other Monial Role" or "Other" describe below: 0-03 (h)	
(Last, First)	Ticket(s)/ Pass(es)	If checking *Ceremo Per Policy No. 100 Ceremonial Role	Other Maniel Role" or "Other" describe below: 0-03 (h)	Income
(Last, First)	Ticket(s)/ Pass(es)	If checking *Ceremo Per Policy No. 100 Ceremonial Role	Other Monial Role" or "Other" describe below: 0-03 (h)	Income
Crist, Marvin	Ticket(s)/ Pass(es)	If checking "Ceremo Per Policy No. 100 Ceremonial Role If checking "Ceremo	Other Manial Role" or "Other" describe below: 0-03 (h) Other Inial Role" or "Other" describe below:	Income _
(Last, First)	Ticket(s)/ Pass(es)	If checking *Ceremo Per Policy No. 100 Ceremonial Role If checking *Ceremo	Other Monial Role" or "Other" describe below: 0-03 (h)	Income _
Crist, Marvin Name of Outside Organization	Ticket(s)/ Pass(es) 2 Number of Ticket(s)/	If checking *Ceremo Per Policy No. 100 Ceremonial Role If checking *Ceremo	Other Manial Role" or "Other" describe below: 0-03 (h) Other Inial Role" or "Other" describe below:	Income Income
Crist, Marvin Name of Outside Organization	Ticket(s)/ Pass(es) 2 Number of Ticket(s)/	If checking *Ceremo Per Policy No. 100 Ceremonial Role If checking *Ceremo	Other Manial Role" or "Other" describe below: 0-03 (h) Other Inial Role" or "Other" describe below:	Income Income
C Name of Outside Organization	Ticket(s)/ Pass(es) 2 Number of Ticket(s)/	If checking *Ceremo Per Policy No. 100 Ceremonial Role If checking *Ceremo	Other Manial Role" or "Other" describe below: 0-03 (h) Other Inial Role" or "Other" describe below:	Income Income
C Name of Outside Organization	Ticket(s)/ Pass(es) 2 Number of Ticket(s)/	If checking *Ceremo Per Policy No. 100 Ceremonial Role If checking *Ceremo	Other Manial Role" or "Other" describe below: 0-03 (h) Other Inial Role" or "Other" describe below:	Income Income
C. Name of Outside Organization (include address and description)	Ticket(s)/ Pass(es) 2 Number of Ticket(s)/	If checking *Ceremo Per Policy No. 100 Ceremonial Role If checking *Ceremo	Other Manial Role" or "Other" describe below: 0-03 (h) Other Inial Role" or "Other" describe below:	Income Income
C Name of Outside Organization	Number of Ticket(s)/ Pass(es)	If checking *Ceremo Per Policy No. 100 Ceremonial Role If checking *Ceremo Describe the pul	Other Monial Role" or "Other" describe below: 0-03 (h) Other Inial Role" or "Other" describe below: Describe below:	Income Income Income
C. Name of Outside Organization (include address and description) . Verification	Number of Ticket(s)/ Pass(es)	If checking "Ceremo Per Policy No. 100 Ceremonial Role If checking "Ceremo Describe the pul erified that the distribution set	Other Monial Role" or "Other" describe below: 0-03 (h) Other Inial Role" or "Other" describe below: Describe below:	Income Income Income

Comment: __

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

١.	Agency Name				Date Stamp	California 802	
	City of Lancaster					Form For Official Use Only	
()	Division, Department, or Regi	on (If Applicabl	(e)		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
					MHY13/16PMl/	2: 5 0:50-GLERK	
T.	Designated Agency Contact (Name, Title)					
	Britt Avrit, City Clerk						
	Area Code/Phone Number	E-mail			Amendment (Must	provide explanation in Part 3.)	
	661-723-6020	bavrit@city	oflancasterca	ı.org	Date of Original Filing	:(Month, Day, Year)	
	Function or Event Inform	mation			**	04 ¢00. Davida¢E	
	. , , , , , , , , , , , , , , , , , , ,				of Each Ticket/Pass \$ =		
	Event Description	Baseball Gar	nes	Date(s)4	, 14 , 16	4 , 28 , 16	
	200111200011121112	Provide Title/Exp	lanation				
	Ticket(s)/Pass(es) provided by	/ agency?	Yes⊠ No	☐ If no:	Name of S	OUEDO	
,	Was ticket distribution made a	t the bobost	NI - 571 14	п			
	of agency official?	it the benest	No⊠ Yes	☐ If yes;	Official's Name	(Last, First)	
	Recipients						
•	Use Section A to identify the agency	r's department or	unit. • Use Sec	ction B to identify an individu	ual. • Use Section C to ide	ntify an outside organization.	
	A. Name of Agency, Departme	nt or Unit	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's polic			
23	Administration/HR		61/10	Per Policy No. 100-03 (a)			
30	Development Services	57/3	Per Policy No. 100-03 (a)				
	B. Name of Individua	ıl	Number of Ticket(s)/ Pass(es)		Identify one of the follow	ving:	
			1 333(33)	Ceremonial Role If checking "Ceremon	Other island of the control of the c	Income	
33				Ceremonial Role If checking "Ceremoni	Other I	Income	
	C. Name of Outside Organ (include address and des		Number of Ticket(s)/ Pass(es)	Describe the pub	lic purpose made pursuan	nt to the agency's policy	
	Larry Dorsey/CA Dept. of Co PO Box 3364, Quartz Hill, C		2/1	Per Policy No. 100-	03 (h)		
	Verification						
		lations 18944 1 on	d 18942 have ve	erified that the distribution set for	orth above, is in accordance w	ith the requirements	
-1	have read and understand FPRC Regul	ations 18944.1 an	d 18942. I have ve Britt Av		orth above, is in accordance w City Clerk	ith the requirements. 5/13/16	



of Lancaster ecipients lse Section A to identify the agency's department of Name of Agency, Department or Unit		
		AL - BA - CL - CE C- AL CALLO - LL O - Mai - O 4- Labor M.C Malda
	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy
inance	10/1	Per Policy No. 100-03 (a)
ousing	4	Per Policy No. 100-03 (a)
RA	19	Per Policy No. 100-03 (a)
ublic Safety	4	Per Policy No. 100-03 (a)
Name of Individual (Last, First)	Number of Ticket(s)/ Pass(es)	Identify one of the following:
		Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
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
	(Last, First) Name of Outside Organization	Warme of Outside Organization Name of Outside Organization Number of Ticket(s)/ Pass(es) Number of Ticket(s)/ Pass(es)

Comment: _____

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

. /	Agency Name				Date Stamp	California 802
(City of Lancaster					Form OUZ
0.00	Division, Department, or Regi	on (If Applicable	e)		1	For Official Use Only
ı	Lancaster Choice Energy				MOUTO/IC-DAY	100197 OLDOV
	Designated Agency Contact (Name, Title)			MAY13′16pm01	. MO'S LOPEKK
	Britt Avrit, City Clerk	· •				
5	Area Code/Phone Number	E-mail			. Amendment (Must p	provide explanation in Part 3.)
	661-723-6020		oflancasterca	.org	Date of Original Filing:	(Month, Day, Year)
_	Function or Event Inforr				J.	
-	Does the agency have a ticket		Yes⊠ No	☐ Face Value o	of Each Ticket/Pass \$ _	24-28
	Event Description Jethawks E			_	, 14 , 16	
E	event Description	Provide Title/Exp	lanation	Date(s)		
7	Ticket(s)/Pass(es) provided by	/ agency?	Yes⊠ No	☐ If no:		
	., ., ., .				Name of So	purce
	Nas ticket distribution made a of agency official?	t the behest	No⊠ Yes	☐ If yes:	Official's Name (I	Last. First)
					Smolar S Name [-9 · · · - 9
	Recipients - Use Section A to identify the agency	''s department or	unit. • Hee See	tion B to identify an individu	ial. • Use Section C to ident	tify an outside organization
-	A. Name of Agency, Departme		Number of Ticket(s)/ Pass(es)		olic purpose made pursuant	
	LCE		44	Per Policy No. 100-	-03 (a)	
-	Development Services		38	Per Policy No. 100-	·03 (a)	
Ē	Name of Individua		Number of Ticket(s)/ Pass(es)		Identify one of the following	ing:
•				Ceremonial Role	Other ial Role" or "Other" describe below:	Income
-				Ceremonial Role	Other island of the control of the c	Income 🗖
-	Name of Outside Organi (include address and desc		Number of Ticket(s)/ Pass(es)	Describe the publ	lic purpose made pursuant	to the agency's policy
	SEE ATTACHED			Per Policy No. 100-	-03 (d)	
_	Verification					
		ations 18944.1 and	d 18942. I have ve	rified that the distribution set fo	orth above, is in accordance wil	th the requirements.
1.	nave read and understand FIPC Regul					
1.	have read and understand FIPC Regul		Britt Av		City Clerk	5/13/16



Agency	Name of Lancaster		ν.
. Rec	ipients	or unit a Hea So	ction 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
Adr	ninistration/City Clerk	4	Per Policy No. 100-03 (a)
Fina	ance	32	Per Policy No. 100-03 (a)
Hou	using	4	Per Policy No. 100-03 (a)
В.	Name of Individual (Last, First)	Number of Ticket(s)/ Pass(es)	Identify one of the following:
)-			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:
5			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
_			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:
			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:
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
-			

LCE JetHawks SkyBox #309 Tickets Issued April 2016

			Employee	Official	
Name	Game Date	# of Tickets	Y/N	Duty	Delivered
Angela Martinez (FB Giveaway)					
1222 W. Ave H-1					
Lancaster, CA 93534	4/19/2016	6	N		4/18/2016
Yanira Velasquez (FB Giveaway)					
42266 42nd St West					
Quartz Hill, CA 93536	4/19/2016	6	N		4/19/2016
Diane Vine (FB Giveaway)					
2501 Bear Valley Road #356					
Tehachapi, CA 93561	4/19/2016	6	N		4/19/2016
Emmanuel Contreras (FB Giveaway)					
43028 W 30th St					
Lancaster, CA 93536	4/20/2016	6	N		4/19/2016
Todd Fogde (FB Giveaway)					
44618 Calston Ave					
Lancaster, CA 93535	4/20/2016	6	N		4/19/2016
		-			

Comment: _

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

	Agency Name			Date Stamp	California 802		
	City of Lancaster					Form OUZ	
	Division, Department, or Reg				1	For Official Use Only	
	Lancaster Choice	e Ereia	et		MAY13'16pm1'	2:50:55-CLERK	
	Designated Agency Contact) ()		1		
	Britt Avrit, City Clerk	ritt Avrit, City Clerk					
	Area Code/Phone Number	E-mail		provide explanation in Part 3.)			
	661-723-6020	bavrit@city	oflancasterca	.org	Date of Original Filing:	(Month, Day, Year)	
<u>. </u>	Function or Event Infor	mation				14	
		oes the agency have a ticket policy? Yes ⊠			of Each Ticket/Pass \$ _		
	Event Description <u>Jethawks</u>	Baseball Gar	nes planation	Date(s)4		4 , 28 , 16	
	Ticket(s)/Pass(es) provided b	y agency?	Yes⊠ No	☐ If no;	Name of So	purce	
	Was ticket distribution made a of agency official?	at the behest	No ⊠ Yes	☐ If yes:	Official's Name	(Last, First)	
_	Recipients						
•	Use Section A to identify the agence	y's department o	runit. • Use Sec	tion B to identify an individ	ual. • Use Section C to ider	ntify an outside organization.	
	A. Name of Agency, Departme	ent or Unit	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy			
	PRA		2	Per Policy No. 100-03 (a)			
Development Services			2	Per Policy No. 100	-03 (a)		
	B. Name of Individual	al	Number of Ticket(s)/ Pass(es)		Identify one of the follow	ving:	
				00.0	Other Inial Role" or "Other" describe below:	Income	
				Ceremonial Role If checking "Ceremon	Other inial Role" or "Other" describe below:	Income	
	C. Name of Outside Organ		Number of Ticket(s)/ Pass(es)	Describe the pub	blic purpose made pursuan	t to the agency's policy	
	SEE ATTACHED			Per Policy No. 100	-03 (0)		
Į.	Verification						
-	Lhave read and understand FPPC Regu	ılations 18944.1 ar	nd 18942. I have ve	erified that the distribution set t	forth above, is in accordance w	ith the requirements.	

LCE JetHawks Diamond Club Tickets Issued April 2016

			Employee	Official	
Name	Game Date	# of Tickets	Y/N	Duty	Delivered
Ben Fowler (FB Giveaway)					
6103 W Ave K-9					
Lancaster, CA 93536	4/14/2016	4	N		4/14/2016
Jennifer Martinez (FB Giveaway)					
2437 Diamond St.					
Rosamond, CA 93560	4/15/2016	4	N		4/15/2016
Sindi Hollands (FB Giveaway)					
1008 West Ave. J12					
Lancaster, CA 93536	4/16/2016	4	N		4/14/2016
Adam Kuester for Erin Kuester (FB					
Giveaway) 3148 Summer Breeze Ave.,					
Rosamond, CA 93560	4/17/2016	4	N		4/14/2016
Melissa Villanueva (FB Giveaway)					
3707 Pondera St.					
Lancaster, CA 93536	4/18/2016	4	N		4/15/2016
Jessica Esteva (FB Giveaway)					
44329 Coyote Brush St.					
Lancaster, CA 93536	4/19/2016	4	N		4/18/2016
Charly Swiger-Peterson (FB Giveaway)					
45830 Suffolk Dr.					
Lancaster, CA 93534	4/20/2016	4	N		4/15/2016
Earl Gately (FB Selfie Contest)					
44740 Genoa Ave					
Lancaster, CA 93534	4/26/2016	4	N		4/20/2016

Comment: __

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

				A Fublic Document	
l. Agency Name			Date Stamp	California 802	
City of Lancaster			Form OUZ		
Division, Department, or Regi	on (If Applicable)			For Official Use Only	
Lancaster Choice Energy			MAY13'16pml2	2:51::01-CLERK	
Designated Agency Contact (Name, Title)		THE SECTION 1975	The second section of the sec	
Britt Avrit, City Clerk				1	
Area Code/Phone Number	E-mail		☐ Amendment (Must p	rovide explanation in Part 3.)	
661-723-6020	bavrit@cityoflancasterca	a.org	Date of Original Filing:	(Month, Day, Year)	
. Function or Event Inform	mation				
Does the agency have a ticket	t policy? Yes⊠ No	☐ Face Value of	f Each Ticket/Pass \$ _	10	
Event Description Poppy Fes	tival	Doto(s) 4	<u>, 16 , 16 </u>	4 , 17 , 16	
Event Description	Provide Title/Explanation	Date(s)			
Ticket(s)/Pass(es) provided by	y agency? Yes ⊠ No	☐ If no:			
.,			Name of So	urce	
Was ticket distribution made a of agency official?	t the behest No ☑ Yes	☐ If yes:	Official's Name (i	l ast First)	
			Smoral o Hanne (I		
 Recipients Use Section A to identify the agency 	's department or unit _= llee Se	ction B to identify an individue	al. • Use Section C to ident	tify an outside organization	
(Number of				
A. Name of Agency, Departme	nt or Unit Ticket(s)/ Pass(es)	Describe the publ	iblic purpose made pursuant to the agency's policy		
LCE		Per Policy No. 100-	03 (b)		
	50	,			
Housing	1	Per Policy No. 100-03 (b)			
B. Name of Individua	Number of Ticket(s)/ Pass(es)		Identify one of the following	ing:	
	F & 33(ES)	Ceremonial Role	Other	Income [
			al Role" or "Other" describe below:		
3		-		-	
			☐ Other ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	Income L	
C. Name of Outside Organi (include address and desc		Describe the publi	ic purpose made pursuant	to the agency's policy	
SEE ATTACHED		Per Policy No. 100-0	03 (e)		
. Verification					
I have read and understand FPPC Regul	lations 18944.1 and 18942. I have ve	erified that the distribution set fo	rth above, is in accordance wit	th the requirements.	
Sitte (Cont	Britt Av	vrit	City Clerk	5/13/16	
Signature of Agency Head or Designee	Print Nan	ne	Title	(Month, Day, Year)	



Agency Name		
City of Lancaster		
Recipients Use Section A to identify the agency's department of the agency of	or unit. • Use Sec	ction 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
Development Services	8	Per Policy No. 100-03 (b)
Finance	17	Per Policy No. 100-03 (b)
PRA	8	Per Policy No. 100-03 (b)
Admin	16	Per Policy No. 100-03 (b)
Name of Individual	Number of Ticket(s)/ Pass(es)	Identify one of the following:
		Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
:		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
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
P 		
		

Name	# of Tickets	Address	Reason
Amy Phy	4	43341 Hampton St, Lancaster, CA 93536	Facebook giveaway - 4/1
Aubrie Hollands	4	5200 Entrar Dr SPC 201, Palmdale, CA 93551	Facebook giveaway - 4/1
Bonnie Aispuro-Guevara	4	2607 Bellevue Way, Palmdale, CA 93550	Facebook Giveaway - 4/14
Breanna Middleton	4	23 Eagle Ct. Edwards, CA 93523	Facebook giveaway - 3/25
Carina Olmedo Hernandez	4	5744 Knightbridge Ct, Palmdale, CA 93552	Facebook Giveaway - 4/14
Caro Lokkz	4	45705 6th St. E, Lancaster, CA 93535	Facebook giveaway - 3/25
Charly Michelle Swiger-Peterson	8	45830 Suffolk Dr., Lancaster, CA 93535	Facebook Giveaway - 4/14
Connie Downs	4	31578 Palomar Rd. Menifee, CA 92584	Facebook giveaway - 4/8
Crisstina McCaslin	4	9235 Kemper Rd., Mojave, CA 93501	Facebook giveaway - 3/25
Dahlia Fonseca	4	2751 East Avenue J-6, Lancaster, CA 93535	Facebook giveaway - 4/1
Diane Vine	4	25101 Bear Valley Rd. #356, Tehachapi, CA 93561	Facebook giveaway - 4/8
Earl Gately	4	44740 Genoa Ave, Lancaster, CA 93534	Facebook Giveaway - 4/14
Electra Rodriguez	4	44331 Amethyst St, Lancaster, CA 93536	Facebook Giveaway - 4/14
Elizabeth Daugherty	4	P.O. Box 2138 Rosamond, CA 93560	Facebook Giveaway - 4/14
Jen Kubat	4	3918 Pacific Ave, Rosamond, CA 93560	Facebook Giveaway - 4/14
Jessica Gunderson	4	40810 Riverrock Lane, Palmdale, CA 93551	Facebook giveaway - 3/25
Jolene Pao	4	43354 Harbor St., Lancaster, CA 93536	Facebook giveaway - 4/8
Jose Vasquez	4	4911 Opal Ave. Palmdale, CA 93552	Facebook giveaway - 3/25
Josie Bonorris	4	3909 Ponderosa St., Lancaster, CA 93536	Facebook Giveaway - 4/14
Kailah Young	4	1133 Morven Street, Lancaster, CA 93535	Facebook giveaway - 4/8
Karen Gonzalez	4	45510 6th Street East, Lancaster, CA 93535	Facebook Giveaway - 3/25
Luis Vasquez	4	44150 35th Street W. #4, Lancaster, CA 93536	Facebook giveaway - 4/1
Margaret O'Neal Johns	4	42849 15th St W Unit 2, Lancaster, CA 93534	Facebook giveaway - 3/25
Marlene Lopez	4	36742 Clearwood Ct. Palmdale, CA 93550	Facebook giveaway - 4/8
Melanie Zimmerman	4	3910 Pacific Ave., Rosamond, CA 93560	Facebook Giveaway - 4/14
Melissa Grubb	4	554 East Ivyton Street, Lancaster, CA 93535	Facebook giveaway - 4/8
Memo Nunez	4	43769 San Francisco Ave, Lancaster, CA 93535	Facebook giveaway - 4/1
Monica Olsen	4	7118 W. Hemlock Ave, Lancaster, CA 93536	Facebook giveaway - 3/25
Olivia Valrodinos Jarquin	4	1206 Pasteur Dr., Lancaster, CA 93535	Facebook giveaway - 4/8
Pamela Olson	4	P.O. Box 1526 Rosamond, CA 93560	Facebook giveaway - 4/8
Sarah Griffith	4	3491 Cahuenga Blvd West, Los Angeles, CA 90068	Facebook giveaway - 4/1
Sarah Mack	4	3808 Juniper Ridge Lane, Rosamond, CA 93560	Facebook giveaway - 4/8
Shanna Reid	4	45225 30th Street East, Lacnaster, CA 93535	Facebook giveaway - 4/1
Shannon Santamaria	4	1624 W. Ave L-4, Lancaster, CA 93534	Facebook Giveaway - 4/14
Toby Huebert-Barnum	4	44603 Palm Lane, Lancaster, CA 93535	Facebook giveaway - 4/1
Victoria Olsen Means	4	41825 55th Street West, Quartz Hill, CA 93536	Facebook giveaway - 3/25
(blank)			

Comment: __

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

						A Public Document	
1.	Agency Name				Date Stamp	California 802	
	City of Lancaster						
	Division, Department, or Reg	Division, Department, or Region (If Applicable)				For Official Use Only	
					MOUL 9/1 Coul 9		
	Designated Agency Contact (Name, Title)				MAY13'16 PM 12	10133-CLERK	
	Britt Avrit, City Clerk	Britt Avrit. City Clerk					
	Area Code/Phone Number	E-mail			Amendment (Must pi	ovide explanation in Part 3.)	
	661-723-6020	bavrit@city	oflancasterca	n.org	Date of Original Filing:	(Month, Day, Year)	
2.	Function or Event Infor	mation			di d		
	Does the agency have a ticke	t policy?	Yes⊠ No	☐ Face Value o	f Each Ticket/Pass \$	10	
	Event Description Poppy Fes	stival		Data(a) 4	, 16 , 16	4 , 17 , 16	
	Event Description	Provide Title/Exp	olanation	Date(s)			
	Ticket(s)/Pass(es) provided by	y agency?	Yes⊠ No	☐ If no:	Name of Sou		
			.00 🔄		Name of Sou	irce	
	Was ticket distribution made a of agency official?	it the behest	No ⊠ Yes	☐ If yes:	Official's Name (L	act Firet)	
					Omciars warne (E		
	Recipients • Use Section A to identify the agency	ı's denartment or	runit allea Sac	etion B to identify an individu	al Uso Section C to ident	ify an outeido organization	
	A. Name of Agency, Departme		Number of Ticket(s)/		lic purpose made pursuant		
	Public Safety		Pass(es)	Per Policy No. 100-03 (a)			
19	Administration/City Clerk/HF	62	Per Policy No. 100-	03 (a)			
,	B. Name of Individua	ıl	Number of Ticket(s)/ Pass(es)		Identify one of the following	ng:	
9				Ceremonial Role	Other All Role" or "Other" describe below:	Income 🗌	
3				Ceremonial Role [Other all Role" or "Other" describe below:	Income 🗌	
	C. Name of Outside Organ (include address and des		Number of Ticket(s)/ Pass(es)	Describe the publ	ic purpose made pursuant l	to the agency's policy	
3							
	Verification I have read and understand FPPC Regul	ations 18944.1 an	d 18942. I have ve	rified that the distribution set fo	rth above, is in accordance with	the requirements.	
5	Breec (S. of		Britt Av		City Clerk	5/13/16	
1	Signature of Agency Head or Designee	——0 H	Print Name		Title	(Month, Day, Year)	



Agency Name			
City of Lancaster 3. Recipients			
Name of Agency, De		Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy
Housing		34	Per Policy No. 100-03 (a)
PRA		202	Per Policy No. 100-03 (a)
Development Services		148	Per Policy No. 100-03 (a)
Finance/LCE		52	Per Policy No. 100-03 (a)
B. Name of Individual		Number of Ticket(s)/ Pass(es)	Identify one of the following:
			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:
× -			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
7			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:
<u> </u>			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:
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