Δ	P	ıh	lic	Do	CH	m	ent
$\boldsymbol{\mathcal{L}}$		_		-			

A M	outions A Public D			
Agency Name	Date Stamp Californi Form	* 802		
City of Lancaster		al Use Only		
Division, Department, or Region (if applicable)	DCT18'16PM04'06'27-CLER	•		
Lancaster Choice Energy	DOLLO TOLMONOMIZI, Army	. •		
Designated Agency Contact (Name, Title)				
Britt Avrit, City Clerk		Amendment (Must Provide Explanation	in Part 3.)	
Area Code/Phone Number E-mail				
661-723-6020 bavrit@cityofla	ncasterca.org	Date of Original Filing:(month, day, y	ear)	
Function or Event Information		4.4		
		ce Value of Each Ticket/Pass \$		
Event Description: Jethawks baseball game	s Da	te(s) 9 / 1 / 16 9 / 5	<u>/ 16</u>	
Provide Title/		100		
Ticket(s)/Pass(es) provided by agency?	res⊠ No LI III	Name of Source		
Was ticket distribution made at the behest	res□ No⊠ If:	res:		
of agency official?		Official's Name (Last, First)		
Recipients				
Use Section A to identify the agency's department or ur		entify an individual. • Use Section C to identify an outside or	ganization.	
A. Name of Agency, Department or Unit	Number of Ticket(s)/	Describe the public purpose made pursuant to the age	ncy's policy	
	Passes			
	Number			
B. Name of Individual	l Number I			
	of Ticket(s)/	Identify one of the following:		
(Last, First)		Identify one of the following:		
	of Ticket(s)/	Ceremonial Role Other	Income	
	of Ticket(s)/		Income	
	of Ticket(s)/	Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below:		
	of Ticket(s)/	Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below:		
	of Ticket(s)/	Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below:	Income	
(Last, First)	of Ticket(s)/ Passes	Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below:		
(Last, First) Name of Outside Organization	of Ticket(s)/ Passes Number of Ticket(s)/	Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below:	Income	
(Last, First) C. Name of Outside Organization (include address and description)	of Ticket(s)/ Passes Number of Ticket(s)/ Passes	Ceremonial Role Other Ceremonial Role" or "Other" describe below: Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below: Describe the public purpose made pursuant to the age	Income	
C. Name of Outside Organization (include address and description) Brittany Campos, 1304 W Ave H-7	of Ticket(s)/ Passes Number of Ticket(s)/ Passes	Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below: Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below:	Income	
C. Name of Outside Organization (include address and description) Brittany Campos, 1304 W Ave H-7 Lancaster, CA 93534	Number of Ticket(s)/ Passes A	Ceremonial Role Other Ceremonial Role" or "Other" describe below: Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below: Describe the public purpose made pursuant to the age	Income	
C. Name of Outside Organization (include address and description) Brittany Campos, 1304 W Ave H-7 Lancaster, CA 93534 Beverly Cox, 43751 Frieda Court	Number of Ticket(s)/ Passes A	Ceremonial Role Other Ceremonial Role" or "Other" describe below: Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below: Describe the public purpose made pursuant to the age	Income	
C. Name of Outside Organization (include address and description) Brittany Campos, 1304 W Ave H-7 Lancaster, CA 93534 Beverly Cox, 43751 Frieda Court Lancaster, CA 93535	Number of Ticket(s)/ Passes Number of Ticket(s)/ Passes 4	Ceremonial Role Other Ceremonial Role" or "Other" describe below: Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below: Describe the public purpose made pursuant to the age	Income	
C. Name of Outside Organization (include address and description) Brittany Campos, 1304 W Ave H-7 Lancaster, CA 93534 Beverly Cox, 43751 Frieda Court	Number of Ticket(s)/ Passes Number of Ticket(s)/ Passes 4	Ceremonial Role Other Ceremonial Role" or "Other" describe below: Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below: Describe the public purpose made pursuant to the age	Income	
C. Name of Outside Organization (include address and description) Brittany Campos, 1304 W Ave H-7 Lancaster, CA 93534 Beverly Cox, 43751 Frieda Court Lancaster, CA 93535 Verification I have read and understand FPPC Regulations 18	Number of Ticket(s)/ Passes Number of Ticket(s)/ Passes 4	Ceremonial Role Other Ceremonial Role" or "Other" describe below: Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below: Describe the public purpose made pursuant to the age	Income	
C. Name of Outside Organization (include address and description) Brittany Campos, 1304 W Ave H-7 Lancaster, CA 93534 Beverly Cox, 43751 Frieda Court Lancaster, CA 93535 Verification	Number of Ticket(s)/ Passes Number of Ticket(s)/ Passes 4	Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below: Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below: Describe the public purpose made pursuant to the age Per policy No. 100-03 (e)	Income	
C. Name of Outside Organization (include address and description) Brittany Campos, 1304 W Ave H-7 Lancaster, CA 93534 Beverly Cox, 43751 Frieda Court Lancaster, CA 93535 Verification I have read and understand FPPC Regulations 18	Number of Ticket(s)/ Passes Number of Ticket(s)/ Passes 4	Ceremonial Role Other Other If checking "Ceremonial Role" or "Other" describe below: Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below: Describe the public purpose made pursuant to the age Per policy No. 100-03 (e) Per Policy No. 100-03 (e)	Income	

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

3.



ency Name									
of Lancaster 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)/ Passes	Describe the public purpose made pursuant to the agency's policy							
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	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 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)/ Passes	Describe the public purpose made pursuant to the agency's policy							
Luis Zimmerman, 1308 E Franklin Ave Lancaster, CA 93535	4	Per Policy No. 100-03 (e)							
Diane Vine, 25101 Bear Valley Rd., # 35 Tehachapi, CA 93561	56 4	Per Policy No. 100-03 (e)							
Christina Alonso, 45111 25th St E #15 Lancaster, CA 93535	4	Per Policy No. 100-03 (e)							

Agency Report of: **Ceremonial Role Events and Ticket/Pass Distributions** A Public Document 1. Agency Name Date Stamp California **Form** City of Lancaster For Official Use Only Division, Department, or Region (if applicable) OCT18'16PM04:**0**6:32-CLERK Designated Agency Contact (Name, Title) Britt Avrit, City Clerk Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: . 661-723-6020 bavrit@cityoflancasterca.org (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 10-\$28;parking \$5 Does the agency have a ticket policy? Yes 🛛 No 🗌 Event Description: <u>Jethawks baseball games</u> Date(s) 9 / 1 / 12 , 16 Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes⊠ No 🗆 Was ticket distribution made at the behest Yes ☐ No ☒ If yes: _ Official's Name (Last, First) of agency official? 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. Number Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ Α. Passes **Development Services** Per Policy No. 100-03 (a) 24 Per Policy No. 100-03 (a) Finance 16 Number Name of Individual Identify one of the following: B. of Ticket(s)/ (Last, First) **Passes** Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: Income \square Ceremonial Role Other 🔀 If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy (include address and description) **Passes** Per Policy No. 100-03 (d) Los Angeles County Sheriff Department 25 551 W Lancaster Blvd, Lancaster, 93534 Per Policy No.100-03 (d) Debbie Bork 25/4 4003 Woburn Ct, Palmdale, CA 93551

4. Verification

with the requirements. //	I have read and understand I	FPPC Regulations	18944.1 and	18942. I have	verified that the	aistribution set to	nπn above, is in acc	coraance
	with the requirements.//							

Suite Chif	Britt Avrit	City Clerk	10/18/16
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)
Comment:			

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

3.



Agency Name										
. Recipier	Recipients									
*			identify an individual. • Use Section C to identify an outside organization. Describe the public purpose made pursuant to the agency's policy							
Admin/HR	R/CC/Comm/IT	Passes 52/3	Per Policy No.100-03 (a)							
Parks, Re	creation & Arts	54	Per Policy No.100-03 (a)							
Housing		2	Per Policy No.100-03 (a)							
В.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	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:							
3			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.	C. Name of Outside Organization (include address and description)		Describe the public purpose made pursuant to the agency's policy							
) 										

Agency Report of:

Ceremonial Role Events and Ticket/Pass Distributions

A Public Document

1.	Agency Name				Date Stamp	California 802	
	City of Lancaster					Form OUZ	
	Division, Department, or Regi	on (If Applicabl	e)		1	For Official Use Only	
				0071 9/1 Roun	4:06:37-CLERK		
	Designated Agency Contact (Name, Title)	DOLLO TOUMO	TWOTOT SEERN			
	Britt Avrit, City Clerk						
	Area Code/Phone Number	E-mail			=	ovide explanation in Part 3.)	
	661-723-6020		oflancasterca.	org	Date of Original Filing: _	(Month, Dav. Year)	
2.	Function or Event Infor	mation					
	Does the agency have a ticke	t policy?	Yes 🗵 No 🏻		f Each Ticket/Pass \$		
	Event Description LPAC Eve	nt		Data(e) 9	, 9 , 16	7	
	Event Description	Provide Title/Exp	lanation	Date(s)			
	Ticket(s)/Pass(es) provided by	y agency?	Yes 🗵 No [] If no:	Name of Sou.		
	AAF- ACID-A SE-A SE-A SE-A SE-A SE-A SE-A SE-A SE	4.46 - 16 - 1 1	_	_			
	Was ticket distribution made a of agency official?	t the benest	No ⊠ Yes [lf yes:	Official's Name (La	ast, First)	
_	Recipients						
J.	• Use Section A to identify the agency	/'s department or	unit. • Use Sect	tion B to identify an individu	ıal. ● Use Section C to identi	fy an outside organization.	
	A. Name of Agency, Departme		Number of Ticket(s)/		lic purpose made pursuant t		
	7 (1 1.1 o		Pass(es)				
			Number of				
	Name of Individua (Last, First)	ıl	Ticket(s)/ Pass(es)	Identify one of the following:			
	<u>u</u>		1 ` 1	Ceremonial Role	Other 🛮	Income	
	Malhi, Raj			-	ial Role" or "Other" describe below:		
				Per Policy 100-03 (h)		
			+	Ceremonial Role	Other	Income	
					ial Role" or "Other" describe below:	псопе 🗀	
	C. Name of Outside Organ (include address and des		Number of Ticket(s)/	Describe the pub	olic purpose made pursuant to the agency's policy		
	(illicitude audiess alla des	onpuon)	Pass(es)				
			1				
_							
4.	Verification I have read and understand FPPC Regu	lations 18944 1 an	d 18942. I have ver	ified that the distribution set fo	orth above, is in accordance with	the requirements.	
(11.11 11 11	ensume 10077. 1 dil				10/18/16	
	Signature of Agency Head or Designee		Britt Avr		City Clerk	(Month, Day, Year)	
	agnature of rigoroy riods of bodighto		, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,,,,,/	
	Comment:						

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

Ceremonial Role Events and Ticket/Pass Distributions	Α	A Public Docume			
1. Agency Name	Date Stamp	California	802		
City of Lancaster		Form	UUL		
Bluislan Danadarant on Bonion (Kanadarata)		For Official U	Jse Only		

١.	Agency Name				Date Stamp	Form 802
	City of Lancaster		1 01111			
	Division, Department, or Reg	ion (if applicable)		For Official Use Only		
	Lancaster Choice Energy		OCT18/16pm04:0	6:40-CLERK		
	Designated Agency Contact	(Name,Title)				
	Britt Avrit, City Clerk		Amendment (Must Pro	vide Explanation in Part 3.)		
	Area Code/Phone Number	E-mail	1			
	661-723-6020	bavrit@cityofland	casterca.org		Date of Original Filing:	(month, day, year)
2.	Function or Event Infor	mation			50	
	Does the agency have a tick	ket policy? Ye	s⊠ No□ F	ace Value of	Each Ticket/Pass \$ 59	
	Event Description: LPAC ev	vent	г	Date(s) 9	<u>, 9 , 16 </u>	1 1
	Event Description.	Provide Title/Ex	planation			
	Ticket(s)/Pass(es) provided	by agency? Ye	s⊠ No□ I	f no:	Name of Source	-
	Was ticket distribution made	at the behest va			Official's Name (Last, First)	
	of agency official?	at the beneat Te	S L NO M	,	Official's Name (Last, First)	
 3.	Recipients					
٠.	• Use Section A to identify the agen	cv's department or unit.	• Use Section B to	identify an individ	lual. • Use Section C to identif	y an outside organization.
			Number			
	A. Name of Agency, Depart	artment or Unit	of Ticket(s)/ Passes	Describe th	Describe the public purpose made pursuant to the agency's policy	
			- 10000			
	R Name of Indi	istalisat	Number		Literatific and of the feet	
	B. Name of Indi		of Ticket(s)/ Passes		Identify one of the fol	lowing:
	,			Cerem	nonial Role Other	Income 🗌
					king "Ceremonial Role" or "Other" descr	ribe below:
				1	nonial Role Other Other Marger Other Other Other Other Other	Income Income
	Name of Outside O	rganization	Number			and to the constitution of
	C. Name of Outside Organization (include address and description)		of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy		
	Melissa Grubb, 554 E. Ivyl	ton	2	Per Policy N	lo. 100-03 (e)	
	Lancaster, CA 93535					
	Melissa Villanueva, 3707 F	2	Per Policy No. 100-03 (e)			
	Lancaster, CA 93536					
1.	Verification					
	I have read and understand FF	PPC Regulations 189	44.1 and 18942.	I have verified	that the distribution set for	th above, is in accordance
	with the requirements.	•				
1	Didt (Chit		Britt Avrit		City Clerk	10/18/16
	Signature of Agency Head or Design	nee	Print Name		Title	(month, day, year)
	_					
	Comment:					