Agency Report of: A Public Document Ceremonial Role Events and Ticket/Pass Distributions 1. Agency Name California Date Stamp City of Lancaster For Official Use Only Division, Department, or Region (if applicable) Lancaster Choice Energy 00709117pm0335102-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: \_ bavrit@cityoflancasterca.org 661-723-6020 (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 15 Does the agency have a ticket policy? Yes⊠ No 🗆 Event Description: <u>Jethawks baseball</u> games Date(s) 9 / 2 / Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? If no: \_\_ Yes ☑ No □ If yes: \_ Was ticket distribution made at the behest Yes ☐ No ☑ 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 Name of Agency, Department or Unit Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ A. Passes Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) Passes Ceremonial Role Other  $\square$ Income If checking "Ceremonial Role" or "Other" describe below. Income 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 (e) Pamela Olson 4 PO Box 1526, Rosamond, CA 93560 Per policy No. 100-03 (e) Beverly Cox 4 43751 Frieda Ct., Lancaster 93535

# 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. Britt Avrit City Clerk 10/9/17 Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment:\_

4. Verification

**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) Lancaster Choice Energy Designated Agency Contact (Name, Title) 00709417pm08H5107-GLERK 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 \$ 24-\$28;parking \$5 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: <u>Jethawks baseball games</u> Date(s) 9 1 1 Provide Title/ Explanation If no: \_ 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)/ A. Passes Admin/HR/CC Per policy No. 100-03 (a) 7 **Development Services** Per policy No. 100-03 (a) 5 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 🔲 Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below. Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ (include address and description) Passes Per Policy 100-03 (g) Christian Life Assembly 18/3 920 W. Valley Blvd., Tehachapi, CA 93560

920 W. Valley Blvd., Tehachapi, CA 93560

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

Britt Avrit

City Clerk

10/9/17

Signature of Agency Head or Designee

Print Name

Title

Comment:

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

3.



• Use Section B to	identify an individual. • Use Section C to identify an outside organization.
Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
10/2	Per policy No. 100-03 (a)
45/7	Per policy No. 100-03 (a)
2/1	Per policy No. 100-03 (a)
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:
Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
	Number of Ticket(s)/ Passes 10/2 45/7 2/1 Number of Ticket(s)/ Passes

1.	Agency Name			Date Stamp	California 802
	City of Lancaster				Form OUZ
	Division, Department, or Reg	ion (if applicable)			For Official Use Only
	2			OCTO9/17px03	   <b>55</b> 0  \$40  CDV
	Designated Agency Contact	(Name,Title)			AMAN OFFIN
	Britt Avrit, City Clerk			Amendment (Must Pr	ovide Explanation in Part 3.)
	Area Code/Phone Number	E-mail		Amendment (wastr /	ovide Explanation in Fair 6.)
	661-723-6020	bavrit@cityoflancasterca.org		Date of Original Filing: _	(month, day, year)
2.	Function or Event Infor	mation			
	Does the agency have a tic	ket policy? Yes ☑ No ☐	Face Value of	Each Ticket/Pass \$	-\$28;parking \$5
	Event Description: Jethawk	s baseball games  Provide Title/ Explanation	Date(s)9	<u>, 1 , 17</u> .	9 13 17
	Ticket(s)/Pass(es) provided	by agency? Yes ☑ No ☐	If no:	Name of Source	
	Was ticket distribution made of agency official?	e at the behest Yes □ No ⊠	If yes:	Official's Name (Last, First)	
3.	Recipients • Use Section A to identify the ager	cy's department or unit. • Use Section 1	3 to identify an individ	lual. • Use Section C to identi	fy 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
Admin-CC-IT-HR	38/11	Per policy No. 100-03 (a)
Development Services	13/3	Per policy No. 100-03 (a)
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Bozigian, Mark	25	Ceremonial Role  Other  Income  Income  If checking "Ceremonial Role" or "Other" describe below:  Per Policy No. 100-03 (h)
		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)/ Passes	Describe the public purpose made pursuant to the agency's policy

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I have read and understand FPPC Regula with the requirements.	tions 18944.1 and 18942. I have	verified that the distribution set fort	h above, is in accordance
Shear Clut	Britt Avrit	City Clerk	10/9/2017
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**



gency Name / of Lancaster		
Recipients	it. • 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
Finance	1/1	Per policy No. 100-03 (a)
Parks, Recreation & Arts	12/1	Per policy No. 100-03 (a)
Housing	6/1	Per policy No. 100-03 (a)
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 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  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
N		
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## Agency Report of:

### Ceremonial Role Events and Ticket/Pass Distributions

#### **A Public Document**

1.						The second of the last of the
	Agency Name				Date Stamp	California 802
	City of Lancaster					Form OOZ
	Division, Department, or Reg	ion (If Applicab	le)		1	For Official Use Only
					OCTAGA 5mg	08:55:22-CLERK
	Designated Agency Contact (	Name, Title)			CONVET CHIM	nb.aa.ss-OFEKK
	Britt Avrit, City Clerk					
	Area Code/Phone Number	E-mail				rovide explanation in Part 3.)
	661-723-6020	bavrit@city	oflancasterca	.org	Date of Original Filing:	(Month Day Year)
<del>_</del>	Function or Event Infor	nation			la .	(monal, bay) realy
	Does the agency have a ticke	t policy?	Yes 🗵 No	☐ Face Value o	of Each Ticket/Pass \$ _	59
	Event Description LPAC Eve	nt			, 23 , 17	
	Event Description	Provide Title/Ex	planation	Date(s)	0	
	Ticket(s)/Pass(es) provided by	v agency?	Yes 🛛 No	□ If no:	Name of So	
		, aga,	TES M INU		Name of So	urce
	Was ticket distribution made a	t the behest	No 🛛 Yes	☐ If yes:	Official's Name (L	4 5 4
	of agency official?				Omciai's Ivame (L	asi, rirstj
3.	Recipients					
	Use Section A to identify the agency		r unit. • Use Sec			
	A. Name of Agency, Departme	nt or Unit	Ticket(s)/ Pass(es)	Describe the pub	lic purpose made pursuant	to the agency's policy
			1 200(00)			
			1 200(00)			
			,,			
			1 400(00)			
	R Name of Individua		Number of			
	B. Name of Individua (Last, First)	ı			Identify one of the followi	ing:
	(Lasi, Firਕੇ)	ı	Number of Ticket(s)/	Ceremonial Role	X Other ☐	ing:
	B. Name of Individua (Lest, First) Parris, R. Rex		Number of Ticket(s)/ Pass(es)	If checking "Ceremon	Other  ial Role" or "Other" describe below:	
	(Lasi, Firਕੇ)	ı	Number of Ticket(s)/		Other  ial Role" or "Other" describe below:	
	(Lasi, Firਕੇ)		Number of Ticket(s)/ Pass(es)	If checking "Ceremon Per Policy 100-03 (	Other Dial Role" or "Other" describe below:	Income
	Parris, R. Rex	ıl	Number of Ticket(s)/ Pass(es)	Per Policy 100-03 (	Other Dial Role" or "Other" describe below:	
	(Lasi, Firਕੇ)	ı	Number of Ticket(s)/ Pass(es)	Per Policy 100-03 (	Other Dial Role" or "Other" describe below:  h)  Other Dial Role" or "Other" describe below:	Income
	Parris, R. Rex		Number of Ticket(s)/ Pass(es)	Per Policy 100-03 (  Ceremonial Role  If checking "Ceremon	Other Dial Role" or "Other" describe below:  h)  Other Dial Role" or "Other" describe below:	Income
	Parris, R. Rex  Malhi, Raj  Name of Outside Organ	ization	Number of Ticket(s)/ Pass(es)	Per Policy 100-03 (  Ceremonial Role If checking "Ceremon Per Policy 100-03 (	Other Dial Role" or "Other" describe below:  h)  Other Dial Role" or "Other" describe below:  h)	Income Income
	Parris, R. Rex  Malhi, Raj	ization	Number of Ticket(s)/ Pass(es)	Per Policy 100-03 (  Ceremonial Role If checking "Ceremon Per Policy 100-03 (	Other Dial Role" or "Other" describe below:  h)  Other Dial Role" or "Other" describe below:	Income Income
	Parris, R. Rex  Malhi, Raj  Name of Outside Organ	ization	Number of Ticket(s)/ Pass(es)	Per Policy 100-03 (  Ceremonial Role If checking "Ceremon Per Policy 100-03 (	Other Dial Role" or "Other" describe below:  h)  Other Dial Role" or "Other" describe below:  h)	Income Income
	Parris, R. Rex  Malhi, Raj  Name of Outside Organ	ization	Number of Ticket(s)/ Pass(es)	Per Policy 100-03 (  Ceremonial Role If checking "Ceremon Per Policy 100-03 (	Other Dial Role" or "Other" describe below:  h)  Other Dial Role" or "Other" describe below:  h)	Income Income
	Parris, R. Rex  Malhi, Raj  Name of Outside Organ	ization	Number of Ticket(s)/ Pass(es)	Per Policy 100-03 (  Ceremonial Role If checking "Ceremon Per Policy 100-03 (	Other Dial Role" or "Other" describe below:  h)  Other Dial Role" or "Other" describe below:  h)	Income Income
	Parris, R. Rex  Malhi, Raj  Name of Outside Organ	ization	Number of Ticket(s)/ Pass(es)	Per Policy 100-03 (  Ceremonial Role If checking "Ceremon Per Policy 100-03 (	Other Dial Role" or "Other" describe below:  h)  Other Dial Role" or "Other" describe below:  h)	Income Income
	Parris, R. Rex  Malhi, Raj  Name of Outside Organ	ization	Number of Ticket(s)/ Pass(es)	Per Policy 100-03 (  Ceremonial Role If checking "Ceremon Per Policy 100-03 (	Other Dial Role" or "Other" describe below:  h)  Other Dial Role" or "Other" describe below:  h)	Income Income
	Parris, R. Rex  Malhi, Raj  C. Name of Outside Organ (include address and des	ization cription)	Number of Ticket(s)/ Pass(es)  Number of Ticket(s)/ Pass(es)	Per Policy 100-03 (  Ceremonial Role If checking "Ceremon Per Policy 100-03 (  Describe the pub	Other  h)  Other  describe below:  h)  Other  describe below:  ial Role" or "Other" describe below:  h)  lic purpose made pursuant	Income In
	Parris, R. Rex  Malhi, Raj  C. Name of Outside Organ (include address and des	ization cription)	Number of Ticket(s)/ Pass(es)  Number of Ticket(s)/ Pass(es)	If checking "Ceremon Per Policy 100-03 (  Ceremonial Role If checking "Ceremon Per Policy 100-03 (  Describe the pub	Other  h)  Other  describe below:  h)  Other  describe below:  ial Role" or "Other" describe below:  h)  lic purpose made pursuant	Income In