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						A Public Documen
. Age	ncy Name	ts and Ticket/P			Date Stamp	
_	of Lancaster				· ·	California 802
11	sion, Department, or Reg	ion (if applicable)			•	For Official Use Only
Lanc	caster Choice Energy				.TH 59	18-dLFRKpa19:20
The second secon	gnated Agency Contact	(Name, Title)			999.5	A D MERCINADRIAL PAGE
	Avrit, City Clerk	NAMES OF THE PROPERTY				
-	Code/Phone Number	E-mail			Amendment (Mi	ust Provide Explanation in Part 3.)
661-	-723-6020	bavrit@cityoflancas	sterca.org		Date of Original Filin	ng:(month, day, year)
. Fun	ction or Event Infor	mation				
Does	s the agency have a ticl	ket policy? Yes [⊠ No 🗆 F	ace Value of	Each Ticket/Pass \$	17
Били	nt Description: Jethawk	_			<u>, 22 , 18 </u>	6 , 24 , 18
Even	nt Description;	Provide Title/ Explai	nation	Jate(s)		0 24 10
Ticke	et(s)/Pass(es) provided	by agency? Yes	No □ I	f no:		
					Name of Source	
	ticket distribution made	e at the behest Yes [☐ No 🖾 📑	f yes:	Official's Name (Last, Fi	rst)
of a	agency official?					,
	ecipients se Section A to identify the agen	cy's department or unit.		identify an individ	ual. • Use Section C to i	dentify an outside organization.
Α.	Name of Agency, Depa	artment or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made	pursuant to the agency's policy
				1		
В.	Name of Indi (Last, Fir		Number of Ticket(s)/ Passes	Correct	Identify one of t	
В.			of Ticket(s)/			r
В.			of Ticket(s)/	If check	nonial Role Othe	r
B		rganization	of Ticket(s)/	If check	ionial Role Othe ing "Ceremonial Role" or "Othe ionial Role Othe ing "Ceremonial Role" or "Othe	r
C.	(Last, Fir	rganization I description)	of Ticket(s)/ Passes Number of Ticket(s)/	Cerem If check Describe th	ionial Role Othe ing "Ceremonial Role" or "Othe ionial Role Othe ing "Ceremonial Role" or "Othe	r
C . Mel 370	Name of Outside O (include address and	rganization description)	Number of Ticket(s)/ Passes	Cerem If check Describe th	nonial Role Othering "Ceremonial Role" or "Othering" Othering "Ceremonial Role" or "Othering "Ceremonial Role" or "Othering "Ceremonial Role" or "Othering" Othering "Ceremonial Role" or "Othering" Othe	r
C. Mel 370 Gra 437 Verif	Name of Outside O (include address and elissa Broones 007 Calle Grande, Palm acie Rodgers 700 Byron Drive, Lancas	rganization description) adale, CA 93580 ster, CA 93535	Number of Ticket(s)/ Passes 1 4	Cerem If check Describe th Per policy N Per policy N	nonial Role Othering "Ceremonial Role" or "Othering "Ceremonial Role" or "Othering "Ceremonial Role" or "Othering "Ceremonial Role" or "Othere public purpose made 10. 100-03 (e) 10. 100-03 (e)	r
C. Mel 370 Gra 437 Verif	Name of Outside O (include address and elissa Broones 007 Calle Grande, Palm acie Rodgers 700 Byron Drive, Lancas fication e read and understand FF	rganization description) ndale, CA 93580 ster, CA 93535	Number of Ticket(s)/ Passes 1 4	Cerem If check Describe th Per policy N Per policy N	nonial Role Othering "Ceremonial Role" or "Othering "Ceremonial Role" or "Othering "Ceremonial Role" or "Othering "Ceremonial Role" or "Othere public purpose made 10. 100-03 (e) 10. 100-03 (e)	r

3.



Agency Name ty of Lancaster		*
Recipients	• Use Section B to	o 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 for the 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)/ Passes	Describe the public purpose made pursuant to the agency's policy
Ryan McKenna 1305 W. Kettering St., Lancaster, CA 93534	4	Per policy No. 100-03 (e)

Agency Report of:

Ceremonial Role Events and Ticket/Pass Distributions	
1. Agency Name	Date Stamp

A	D -	. L. I	: -	D = =	
A	PL	IDI	IC	Document	

1. Agency Name				Date Stamp	California 802	
City of Lancaster					Form OUZ	
Division, Department, or Regio	n (if applicable)				For Official Use Only	
Lancaster Choice Energy				<u> </u>	JEKKPR ZUE	
Designated Agency Contact (N	ame,Title)					
Britt Avrit, City Clerk				Amendment (Must Pro	ovide Explanation in Part 3.)	
Area Code/Phone Number	E-mail			_		
661-723-6020	bavrit@cityoflancas	terca.org		Date of Original Filing:	(month, day, year)	
2. Function or Event Inform	ation					
Does the agency have a ticke	et policy? Yes	No ☐ F	ace Value of I	Each Ticket/Pass \$	\$28;parking \$5	
Event Description: Jethawks	baseball games Provide Title/ Explan			6 / 18		
Ticket(s)/Pass(es) provided b	y agency? Yes ∑	I No □	f no:	Name of Source		
Was ticket distribution made a	at the behest Yes [] No⊠ ^{II}	yes:	Official's Name (Last, First)	x	
of agency official?						
3. Recipients						
Use Section A to identify the agency	's department or unit. • 1	Use Section B to i	identify an individ	ual. • Use Section C to identif	y an outside organization.	
A. Name of Agency, Depart	ment or Unit	Number of Ticket(s)/ Passes	Describe the	e public purpose made pursu	uant to the agency's policy	
Parks, Recreation & Arts De	72/5	Per policy No	No. 100-03 (a)			
Development Services Dept		34/5	Per policy No	o. 100-03 (a)		
B. Name of Indivi- (Last, First)		Number of Ticket(s)/ Passes		Identify one of the fol	lowing:	
				onial Role Other ing "Ceremonial Role" or "Other" descri	Income In	
			1	onial Role Other on "Other" descri	Income Income	
Name of Outside Org		Number of Ticket(s)/ Passes	Describe the	e public purpose made pursu	ant to the agency's policy	
Hunter Dodge 1130 Auto Mall Dr., Lancast	er, CA 93535	18	Per policy No	o. 100-03 (h)		
LA County Sheriff Dept 501 W. Lancaster Blvd., Lan	caster, CA 93535	18	Per policy No	o. 100-03 (h)		
1. Verification						
	gulations 18944.	1 and 18942.	l have verified ti	hat the distribution set for	th above, is in accordance	
	Bri	tt Avrit		City Clerk	7/5/18	
	Pri	nt Name		∏tle	(month, day, year)	
Comment:						

3.



Agency Name		
Recipients * Use Section A to identify the agency's department or unit	• Use Section R to	identify an individual. • Use Section C to identify an outside organization.
A. Name of Agency, Department or Unit	Number of Ticket(s)/	Describe the public purpose made pursuant to the agency's policy
Housing Dept.	11/1	Per policy No. 100-03 (a)
Finance Dept.	6	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 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:
		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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Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions

Ceremonial Role Events and Ticket/Pass Distributions	A Public Document			
. Agency Name	Date Stamp	California 802		
City of Lancaster		Form OUZ		
Division, Department, or Region (if applicable)		For Official Use Only		

	City of Lancaster					Form 8UZ	
	Division, Department, or Reg	ion (if applicable)				For Official Use Only	
	Designated Agency Contact	(Nama Title)			JUL 51.8-30	RKPM 2:08	
	Britt Avrit, City Clerk	ivairie, riue)					
	Area Code/Phone Number	E-mail			Amendment (Must Provide	Explanation in Part 3,)	
	661-723-6020	bavrit@cityoflanca	sterca.org		Date of Original Filing:	onth, day, year)	
_	Function or Event Infor				(77	Simi, day, year,	
••	Does the agency have a tick		₩ N. III F	Face Value of	Each Ticket/Pass \$ 24-\$28	;parking \$5	
	Event Description: Jethawk	Provide Title/ Expla	nation [Date(s)	<u>, 5 , 18 6</u>		
	Ticket(s)/Pass(es) provided	· · · · · · · · · · · · · · · · · · ·		f no:	Name of Source		
	Was ticket distribution made	e at the behest Yes [□ No⊠ ^I	f yes:	Official's Name (Last, First)		
	of agency official?						
	Recipients						
	• Use Section A to identify the agen	cy's department or unit.	Use Section B to	identify an individ	lual. • Use Section C to identify an	outside organization.	
	A. Name of Agency, Depart	Name of Agency, Department or Unit			Describe the public purpose made pursuant to the agency's		
	City Managers Office Dept.		30/3	Per policy No. 100-03 (a)			
	Development Services De	pt.	35/1	Per policy N	o. 100-03 (a)		
	B. Name of Indi		Number of Ticket(s)/ Passes		Identify one of the following	ng:	
	Crist, Marvin		2	If check	nonial Role Other Ining "Ceremonial Role" or "Other" describe be o. 100-03 (h)	Income I	
	Underwood-Jacobs, Angel	a	2		nonial Role Other or "Other" describe be on 100-03 (h)	Income I	
	C. Name of Outside O		Number of Ticket(s)/ Passes	Describe th	e public purpose made pursuant	to the agency's policy	
	Andy Visokey/DC Cross C 44662 15th St. W, Lancas		25/1	Per policy N	o. 100-03 (i)		
	Lorene Chalfant:Womens 1218 Pasteur, Lancaster, c		25/1	Per policy N	o. 100-03 (d)		
	Verification						
		egulations 18944	.1 and 18942.	l have verified t	that the distribution set forth al	ove, is in accordance	
			ritt Avrit		City Clerk	7/5/18	
		P	rint Name		Title	(month, day, year)	
	Comment:						



Agency Name			
City of Lancaster			

Recipients

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
Public Safety	8/2	Per policy No. 100-03 (a)
Parks, Recreation & Arts Dept.	21/2	Per policy No. 100-03 (a)
Finance	7/2	Per policy No. 100-03 (a)
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Mann, Ken	2	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below: Per policy No. 100-03 (h)
Malhi, Raj	2	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below: Per policy No. 100-03 (h)
Rodriguez, Liza	2	Ceremonial Role Other Image Income Income If checking "Ceremonial Role" or "Other" describe below: Per policy No. 100-03 (h)
Vierra, David	2	Ceremonial Role Other Income Income Francisco Per policy No. 100-03 (h)
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
Liza Rodriguez/AVDVC 1150 W Ave I, Lancaster CA 93534	25/1	Per policy No. 100-03 (g)

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	Agency Name City of Lancaster Division, Department, or Region (if applicable)			Date Stamp	California 802
					I OIIII
					For Official Use Only
	Lancaster Choice Energy			JUL 5/18-CLERKPM 2:07	
	Designated Agency Contact (Name, Title)			The state of the s	
	Britt Avrit, City Clerk			Amendment (Mus	t Provide Explanation in Part 3.)
	Area Code/Phone Number E-mail			Date of Original Filing:	
	661-723-6020 bavrit@cityoflanc	asterca.org		Date of Original Filing	(month, day, year)
	Function or Event Information				50 I
	Does the agency have a ticket policy? Yes	s⊠ No□ F	Face Value of Ea	ach Ticket/Pass \$.	50;parking \$5
	Event Description: 38 Special Concert		Date(s)6/_	18 / 18	1 1
	Provide Title/ Exp	lanation			
	Ticket(s)/Pass(es) provided by agency? Yes	S⊠ No □ I	If no:	Name of Source	
	Was ticket distribution made at the behest Yes		If yes:	Official's Name (Last, Firs	
	of agency official?			Official's Name (Last, Firs	t)
_					
	Recipients • Use Section A to identify the agency's department or unit.	* Use Section D to	idontify an individua	l . Hea Section C to ide	antifu an outside organization
	- Ose Section A to identify the agency's department of unit.	Number	I dentity att mutvidua	ii. • Ose section C to ide	entity an outside organization.
	A. Name of Agency, Department or Unit	of Ticket(s)/ Passes	Describe the	public purpose made p	ursuant to the agency's policy
	Parks, Recreation & Arts Dept.	18	Per policy No. 100-03 (a)		
	B. Name of Individual	Number		Identify one of the	a fallowing:
	(Last, First)	of Ticket(s)/ Passes		identity one of the	e tollowing:
				nial Role Other "Ceremonial Role" or "Other"	
	<u>v</u>			nial Role Other "Ceremonial Role" or "Other"	
	C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the p	public purpose made p	ursuant to the agency's policy
			1		
-	Verification				
		14.1 and 18942.	I have verified tha	at the distribution set	forth above, is in accordanc
	Regulations 1894	44.1 and 18942. Britt Avrit	I have verified the	at the distribution set City Clerk	forth above, is in accordance 7/5/18

Agency Report of:

Ceremonial Role Events and Ticket/Pass Distributions	A Public Document		
1. Agency Name	Date Stamp	California	202
City of Lancastor		Form	UUL

Agency Name				Date Stamp	California 802	
City of Lancaster				1 01111		
Division, Department, or Region (if applicable)				1	For Official Use Only	
				Jul 54.0	3-0.ER(PR 2/0)	
Designated Agency Contact (Name, Title)				7,600,00		
Britt Avrit, City Clerk				Amandmant (Must Provide Evaluation in Red 2)		
Area Code/Phone Number E-mail			Date of Original Filing:			
661-723-6020 bavrit@cityoflancasterca.org						
Function or Event Informa	ation					
Does the agency have a ticket	policy? Yes	⊠ No □ F	ace Value of I	Each Ticket/Pass \$ _	0;parking \$5	
Event Description: 38 Special	Concert Provide Title/ Exp	lanation	Date(s)6	<u>, 18 , 18 </u>		
Ticket(s)/Pass(es) provided by	<u>-</u>		no:			
		_		Name of Source		
Was ticket distribution made at of agency official?	t the behest Yes	I No⊠ II	yes:	Official's Name (Last, First)	<u> </u>	
Recipients						
• Use Section A to identify the agency's	s department or unit.		dentify an individ	lual. • Use Section C to iden	tify an outside organization.	
A. Name of Agency, Departm	nent or Unit	Number of Ticket(s)/ Passes	Describe the	e public purpose made pu	rsuant to the agency's policy	
City Managers Office Dept.		7/3	Per policy No	o. 100-03 (a)		
Development Services Dept.		6	Per policy No	o. 100-03 (a)		
B. Name of Individ	ual	Number of Ticket(s)/ Passes		Identify one of the	following:	
Crist, Marvin		2/1	If check	nonial Role		
Underwood-Jacobs, Angela		4,	1	nonial Role Other C king "Ceremonial Role" or "Other" de D. 100-03 (h)		
C. Name of Outside Orga (include address and de		Number of Ticket(s)/ Passes	Describe the	e public purpose made pu	rsuant to the agency's policy	
		, ž				
Verification	15					
	ations 1894	4.1 and 18942.	l have verified t	that the distribution set f	orth above, is in accordance	
	E	Britt Avrit		City Clerk	7/5/18	
Verification Comment:	E		l have verified t	that the distribution set for City Clerk Title	orth above, is a	



gency y of Lai	ncaster						
Reci	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.						
• Use S							
Α.	Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy				
Finar	nce	4	Per policy No. 100-03 (a)				
<u>*</u>							
В.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:				
Malhi	i, Raj	2/1	Ceremonial Role ☑ Other ☐ 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:				
71			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)/ Passes	Describe the public purpose made pursuant to the agency's policy				
()							
0							