#### 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 ERKPM12:39 00Tu 5'18-81 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 \$ 24-\$28;parking \$5 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: <u>Jethawks base</u>ball games Date(s) \_ Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐ If no: Was ticket distribution made at the behest Yes ☐ No ☒ If yes: . 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 A. of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy Passes Parks, Recreation & Arts Dept. Per policy No. 100-03 (a) 35/1 **Development Services Dept** Per policy No. 100-03 (a) 6 Number Name of Individual B. of Ticket(s)/ Identify one of the following: (Last, First) Passes Other Income Ceremonial Role 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 poli	
Verification		have verified that the distribution set forth above is in accordance	

Ceremonial Role

Other

If checking "Ceremonial Role" or "Other" describe below.

Britt Avrit City Clerk 10/15/18
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment:

Income

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



٩g	ency Name		
ty (	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
	Administrative & Community Svcs Dept	2	Per policy No. 100-03 (a)
	Finance Dept.	34	Per policy No. 100-03 (a)
	Administration/City Manager's Office	1	Per policy No. 100-03 (a)
100	Housing	5	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
-			Ceremonial Role  Other  Income If checking "Ceremonial Role" or "Other" describe below:
7			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
=			Ceremonial Role  Other  Income  Income
	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

### **Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions** A Public Document 1. Agency Name Date Stamp California City of Lancaster For Official Use Only Division, Department, or Region (if applicable) BCT1528-0 ERKPH12:39 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 \$ 24-\$28;parking \$5 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: <u>Jethawks baseball</u> games Date(s) 9 / 5 / Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ⊠ No □ If 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 Name of Agency, Department or Unit Describe the public purpose made pursuant to the agency's policy A. of Ticket(s)/ Passes Administration/City Managers Office Per policy No. 100-03 (a) 14/2 **Development Services** Per policy No. 100-03 (a) 2 Number B. Name of Individual Identify one of the following: of Ticket(s)/ (Last, First) Passes Other Income Ceremonial Role If checking "Ceremonial Role" or "Other" describe below: Ceremonial Role Income Other If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization C. of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy (include address and description) Passes

4. Verification

1	Alth the requirements.	_					
		nd FPPC Regulations	18944,1 and 1	8942. I have verified that	the distribution set	forth above,	is in accordanc

Serie 1	Xajo T	in to
	of Agency Head or Designee	

Brit	t	Avrit	

City	Clerk
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10/15/18

(month, day, year)

Comment: \_

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

	California Form	802
ΔÍ	Public Dod	rument

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)/	Describe the public purpose made pursuant to the agency's policy		
Administrative & Community Services	6/1	Per policy No. 100-03 (a)		
Parks, Recreation & Arts Dept.	3	Per policy No. 100-03 (a)		
B. Name of Individual	Number of Ticket(s)/	Identify one of the following:		
(Last, First)	Passes	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:		
		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		

# Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions **A Public Document**

1.	Agency Name				Date Stamp	Form 802
	City of Lancaster					
	Division, Department, or Reg	ion (if applicable)				For Official Use Only
					#8011248	LERKPM 4/55
	Designated Agency Contact (	(Name, Title)				1
	Britt Avrit, City Clerk				Amendment (Must Pr	ovide Explanation in Part 3.)
	Area Code/Phone Number	E-mail				ovido Exploration III 7 dit oly
	661-723-6020	bavrit@cityoflar	casterca.org		Date of Original Filing: _	(month, day, year)
2.	Function or Event Infor	mation				
	Does the agency have a tick	ket policy? Y	es 🗵 No 🗌 📑	ace Value of	Each Ticket/Pass \$ $\frac{59}{}$	
	Event Description: LPAC Ex	vent		Dato(s) 9	<u>/ 8 / 18</u>	
	Lvent Description.	Provide Title/ E	xplanation	Jate(5)	·——	
	Ticket(s)/Pass(es) provided	by agency? Y	es 🛛 No 🗌 📑	f no:		
		4 4 5		f voo:	Name of Source	
	Was ticket distribution made of agency official?	e at the benest Y	es □ No ⊠ <sup>l'</sup>	1 yes	Official's Name (Last, First)	
	or agency official?					
3.	Recipients					
	• Use Section A to identify the agen	icy's department or uni	t. • Use Section B to	identify an individ	lual. • Use Section C to identi	fy an outside organization.
	A. Name of Agency, Depa	artment or Unit	Number of Ticket(s)/	Describe th	e public purpose made purs	suant to the agency's policy
			Passes			
			Number			
	B. Name of Indi		Number of Ticket(s)/		Identify one of the fo	ollowing:
	(Last, Fir.	Si)	Passes			
	Malhi, Raj				nonial Role 🔀 Other 🗌 king "Ceremonial Role" or "Other" des	· · · · · · · · · · · · · · · · · · ·
			2	Per policy N	lo. 100-03 (h)	
				·	🗖 🗆	
	Underwood-Jacobs, Angel	la	2	If check	nonial Role X Other L king "Ceremonial Role" or "Other" des	<u> </u>
				Per policy N	o. 100-03 (h)	
	Name of Outside O		Number			
	C. Name of Outside Organization (include address and description)		of Ticket(s)/ Passes	Describe th	ne public purpose made purs	suant to the agency's policy
	9					
_	Verification		A.			
	I have gad and understand FP	DDC Pagulations 15	1011 1 and 18012	I have verified	that the distribution sat fo	uth above is in accordance
	with the requirements	r o negulations 10	377 I allu 10942.	riiave verilled	urat trie distribution set 10	nun above, is in accordance
	willy lye requirements					
	Sof Curt		Britt Avrit		City Clerk	10/12/18

have read and understand FPPC Regula vitty the requirements	tions 18944.1 and 18942. I have t	verified that the distribution set fort	h above, is in accordar
Sof Clay	Britt Avrit	City Clerk	10/12/18
Signature of Agency Head or Designee	Print Name	Title	(month, day, year,

### **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) OCT: 2'18 - LERKPM 4:55 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 \$ 59 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: LPAC Event Date(s) 9 / 14 / Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? If no: \_\_\_\_ Yes ⊠ No □ Name of Source 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 Name of Agency, Department or Unit Describe the public purpose made pursuant to the agency's policy Α. of Ticket(s)/ Passes Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) Passes Ceremonial Role X Other Income Parris, R. Rex If checking "Ceremonial Role" or "Other" describe below. 2 Per policy No. 100-03 (h) Income Ceremonial Role Other $\square$ If checking "Ceremonial Role" or "Other" describe below Number Name of Outside Organization C. Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ (include address and description) **Passes**

4. N	/ozifi	ootion	
4. Y	renni	ication	

Į.	have read and und	derstand FPPC	Regulations 189	44.1 and 1894:	2. I have verified ti	hat the distribution s	et forth above,	is in accordance
v	vith the requiremen	ots //	•				•	
ē		///						

Ssott Clut	Britt Avrit	City Clerk	10/12/18
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

Comment: \_

# Agency Report of: Ceremonial Role E

	A Public Document		
Date Stamp	California 802		
	Form OUZ		
	For Official Use Only		
0071248	= 1LERKPM 0:55		
	•		

City of Lancaster					Form OUL
Division, Department, or Reg	ion (if applicable)				For Official Use Only
				QC712'18=	LERKPM 43,55
Designated Agency Contact	Name, Title)				
Britt Avrit, City Clerk		Amendment (Must Pro	wide Evaluation in Red 3 \		
Area Code/Phone Number	E-mail			Amendment (Musi F70	viue Explanation in Fait 3.)
661-723-6020	bavrit@cityofland	casterca.org		Date of Original Filing:	(month, day, year)
2. Function or Event Infor	mation				10
Does the agency have a tick	ket policy? Ye	s⊠ No□ F	ace Value of	Each Ticket/Pass \$ 40	
Event Description: LPAC Ev	/ent			<u>, 21 , 18</u>	<u> </u>
	Provide Title/ Ex	planation			
Ticket(s)/Pass(es) provided	by agency? Ye	s⊠ No 🔲 I	t no:	Name of Source	
Was ticket distribution made	at the behest ve			Official's Name (Last, First)	
of agency official?	11 11 10		-	Official's Name (Last, First)	
B. Recipients					
<ul><li>B. Recipients</li><li>Use Section A to identify the agen</li></ul>	cv's department or unit	• Use Section R to	identify an individ	ual • Use Section C to identif	iv an outside organization
- The state of the	ey sucpartment of unit	Number	I	dai. Ost section C to identifi	y an outside of gamzation,
A. Name of Agency, Depart	rtment or Unit	of Ticket(s)/ Passes	Describe th	e public purpose made pursi	uant to the agency's policy
		-			
₹1					
B. Name of Indi	vidual	Number		Identify and of the fo	Have days
(Last, Fire		of Ticket(s)/ Passes		Identify one of the fol	lowing:
Underwood-Jacobs, Angel	a			nonial Role X Other	Income
ondorwood daoobs, / ingor	<b>.</b>	2	Per policy N	king "Ceremonial Role" or "Other" desc. O. 100-03 (h)	ribe below:
			To policy N	5. 100-00 (II)	
			Cerem	nonial Role X Other	Income
			If check	king "Ceremonial Role" or "Other" desc.	ribe below:
***************************************					
C. Name of Outside Organization (include address and description)		Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency		uant to the agency's policy
2					
. Verification					
I have read and understand FP with the requirements.	PC Regulations 189	144.1 and 18942.	I have verified t	hat the distribution set for	th above, is in accordance
( //2 m) (b. l	<u>ن</u>	Duta A 11		0'' 0' '	40110110
Signature of Agency Head or Design		Britt Avrit Print Name		City Clerk	10/12/18 (month, day, year)
- goldy House of Dodgi		. martanic		THE	(monun, uay, year)
Comment:					

# 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 Reg	ion (if applicable)		For Official Use Only		
			OCT12'18-(	LERKPM 4:55		
	Designated Agency Contact (	Name,Title)				
	Britt Avrit, City Clerk		Amendment (Must Pro	vida Evalanation in Bort 3 )		
	Area Code/Phone Number	E-mail	- International (Master royale Explanation III) and our			
	661-723-6020	bavrit@cityoflar	casterca.org		Date of Original Filing:	(month, day, year)
_	Function or Event Infor	mation				(, == <b>3, 3</b> = 4.7)
۷.			F-1		Each Ticket/Pass \$ 79	
	Does the agency have a tick		_			
	Event Description: LPAC Ex	ent		Date(s)	<u>, 22 , 18</u> _	
	Ticket(s)/Pass(es) provided	Provide Title/ E	•	f no:		
	rioket(s)ri ass(es) provided	by agency:	62 KT 140 LT 11	1110.	Name of Source	*
	Was ticket distribution made	at the behest You	es □ No ⊠ <sup>It</sup>	f yes:	Official's Name (Last, First)	
	of agency official?		— · ·		Official's Name (Last, First)	
_	De dele de					
3.	Recipients		4 A I I C 4 D 4		lui attues de Carta de	
	Use Section A to identify the agen	cy's department or uni	Number	Identity an individ	lual. • Use Section C to identif	y an outside organization.
	A. Name of Agency, Depart	ertment or Unit	of Ticket(s)/	Describe th	e public purpose made purs	uant to the agency's policy
	<del></del>					
			l			
	B. Name of Indi		Number of Ticket(s)/ Passes		Identify one of the fo	llowing:
	Parris, R. Rex				nonial Role 🗵 Other 🗌	Income
	· ame in tox		2		king "Ceremonial Role" or "Other" desc o. 100-03 (h)	ribe below:
				ј. с. решју н		
	Underwood-Jacobs, Angela				Ceremonial Role 🗵 Other 🗌 Inco	
			2	Per policy No	king "Ceremonial Role" or "Other" desc O. 100-03 (h)	ribe below:
				l or policy its	o. 100 00 (II)	
	C. Name of Outside Organization		Number of Ticket(s)/	Describe th	e public purpose made purs	uant to the agency's policy
	(include address and	description)	Passes			
4.	Verification					
-	I have read and understand FP	PC Regulations 18	944.1 and 18942.	I have verified	that the distribution set for	th above, is in accordance
(	with the requirements.	7				
	Islow Cla	1	Britt Avrit		City Clerk	10/12/18
-	Signature of Agency Head or Design	iee	Print Name		Title	(month, day, year)
	Comment:					

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



ity of Lancaster						
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 or						
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:				
Mann, Ken	2	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:				
		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				

### **Agency Report of:**

of agency official?

with the requirements.

Comment: \_\_

Recipients

	eremonial Role Even	ts and Tick	A Public Document				
<u>1.</u>	Agency Name					Date Stamp	California 802
	City of Lancaster						Form OUZ
	Division, Department, or Reg	ion (if applicable)					For Official Use Only
						artiona r	LERKP# 4:55
	Designated Agency Contact	(Name, Title)				LNILL LOT	
	Britt Avrit, City Clerk				Amendment (thu)	Carlo Contraction Contract	
	Area Code/Phone Number E-mail					Amendment (Must Provide Explanation in Part 3.)	
	661-723-6020	bavrit@cityot	flancaste	rca.org		Date of Original Filing:	(month, day, year)
2.	Function or Event Infor	mation					
	Does the agency have a tick	ket policy?	Yes 🗵	No 🗆	Face Value of	Each Ticket/Pass \$ 64	
	Event Description: LPAC Ev	vent			Date(s)9	, 23 , 18	, ,
	Provide Title/ Explanation			Dui.0(0)			
	Ticket(s)/Pass(es) provided	by agency?	Yes 🛭	No 🗆	If no:	Name of Source	
	Was ticket distribution made	at the behest	Yes 🗌	No 🗵	If yes:	Official's Name (Last, First)	

	ne of Agency, Department or Unit	Number of Ticket(s)/ Passes	identify an individual. • Use Section C to identify an outside organization.  Describe the public purpose made pursuant to the agency's policy
В.	Name of Individual	Number of Ticket(s)/	Identify one of the following:
	(Last, First)	Passes	,
Underwood-	Jacobs, Angela	2	Ceremonial Role  Other  Income  Income  If checking "Ceremonial Role" or "Other" describe below:  Per policy No. 100-03 (h)
			Ceremonial Role  Other  Income  Income  If checking "Ceremonial Role" or "Other" describe below:
	lame of Outside Organization clude address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
/orification			

Lhave read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance

**Britt Avrit** 

Print Name

FPPC Form 802 (2/2016)

10/12/18

(month, day, year)

City Clerk