

Tickets Provided by Agency Report

A Public Document

TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802
City of Riverside			For Official Use Only
Division, Department, or Region (if applicable)			
Development Dept.			
Street Address			
3900 Main St., Riverside, CA 92522		<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	
Area Code/Phone Number	E-mail		
951-826-5769	phogan@riversideca.gov		
Agency Contact (name and title)			
Pamela Hogan			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 01 / 22 / 10 Description of Event: Sheryl Crow Concert
 _____ / _____ / _____ Face Value of Ticket: \$ 127.00

Agency Event Yes No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: _____

Number of Tickets Received: _____ Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
See Attached List		

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: _____

Name of Individual or Organization: _____ Number of Tickets: _____

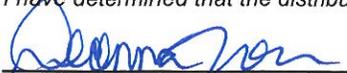
Description of Organization: _____

Address of Organization: _____
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

 Deanna Lorson Director
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

City of Riverside Fox Performing Arts Center Ticket Distribution List

Event:		Sheryl Crow Concert		Ticket value	
Date:		1/22/2010		\$127	
Last name	First Names	#	Value	Purpose	
Bailey	Rusty	1	\$127	Promotion of City Profile	
Davis	Paul	1	\$127	Promotion of City Profile	
Gardner	Mike	1	\$127	Promotion of City Profile	
Hart	Nancy	1	\$127	Promotion of City Profile	
Melendrez	Andy	1	\$127	Promotion of City Profile	
Total		5	\$635		

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1. Agency Name City of Riverside		Date Stamp RECEIVED MAY 24 2010 City of Riverside City Clerk's Office	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) Development Dept.			
Street Address 3900 Main St., Riverside, CA 92522		<input type="checkbox"/> Amendment (Must explain in Part 5.)	
Area Code/Phone Number 951-826-5769	E-mail phogan@riversideca.gov	Date of Original Filing: _____ (month, day, year)	
Agency Contact (name and title) Pamela Hogan			

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Tavaglione, John	1	Promotion of City Profile

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Name of Behesting Agency Official: _____
 Name of Individual or Organization: _____ Number of Tickets: _____
 Description of Organization: _____
 Address of Organization: _____
Number and Street City State Zip Code
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Deanna Lorson Deanna Lorson Director 5/4/10
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
