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

A Public Document

1.	Agency Name				Date Stamp	California Q02		
	City of Citrus Heights					Form OUZ		
	Division, Department, or Reg	or Region (if applicable)				For Official Use Only		
	Designated Agency Contact (Name, Title)							
	Amy Van, City Clerk							
	Area Code/Phone Number	•			Amendment (Must Provide Explanation in Part 3.)			
	916-727-4704	avan@citrusheight	s.net		Date of Original Filing:	(month, day, year)		
_ 2.	Function or Event Information							
	Does the agency have a ticket policy? Yes ⊠ No ☐ Face Value of Each Ticket/Pass \$ 45.00							
	Event Description: Lions Project for Canine Companions Date(s) 3 6 19							
	Ticket(s)/Pass(es) provided by agency? Yes No I If no: Name of Source							
	Was ticket distribution made at the behest Yes ☐ No ☒ If yes:							
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 organization.							
	A. Name of Agency, Depar	artment or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made purs	uant to the agency's policy		
	Community Development Department		6	Ticket Policy	Ticket Policy Section E.3e			
	General Services Department		2	Ticket Policy Section E.3e				
	B. Name of Individual (Last, First)		Number of Ticket(s)/ Passes	Identify one of the following:				
	Bret Daniels		1	Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: Ticket Policy Section 0.3.6				
					nonial Role	Income In		
	C. Name of Outside O (include address and		Number of Ticket(s)/ Passes	Describe th	e public purpose made purs	uant to the agency's policy		
-	Verification							
	I have read and understand FF	PPC Regulations 18944	.1 and 18942.	I have verified	that the distribution set for	th above, is in accordance		
	with the requirements.		entra entra esta esta esta esta esta esta esta est					
	Clima Van	Amy	Van		aty Clerk	3-19-19		
	Signature of Agency Head or Design	nee P	rint Name) Title	(month, day, year)		
	Comment:							

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



Agency ty of Cit	rus Heights							
	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.			Describe the public purpose made pursuant to the agency's policy					
Police	e Department	1	Ticket Policy Section E.3e					
E								
В.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:					
\ <u>-</u>			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:					
(Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:					
8			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:					
H.			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					
2. 								
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