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

California Form 802

If Amendment - Date of Original Filing (Month, Day, Year)

A Public Document

1. Agency Name	City of Citrus Heights		
Division, Dept. or Region (If Applicable)		Area Code/Phone Number	de/Phone Number 916-727-4704
Designated Agency Contact (Name, Title)	Arny Van, City Clerk	Email	Email avan@citrusheights.net

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

Signature of Agency Head or Designee	com far	Print Name	Amy Van
Title 1	City Oclerk	Month, Day, Year	march 29,2017
2. Function or Event Information	ation		

	No		Yes	3/11/2017	Lion's Club Crab Feed 3/11/2017	\$50.00	Yes
If yes, list Name of Official (Last, First)	Was ticket distribution made at the behest of agency official? (Y/N)	If no, list Name of Source	Ticket(s)/Pass(es) provided by Agency? (Y/N)	Event Date(s)	Event Description (Provide Title/Explanation)	Does the agency have ticket policy (Y/N) Face Value of each Ticket/Pass	Does the agency have ticket policy (Y/N)
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Number of Number of Describe the public purpose mad Number of Pursuant to the agency's policy	Number of Ticket(s)/ Pass(es	Describe the public purpose made pursuant to the agency's policy	Name of Individual (Last, First)	Number of Ticket(s)/ Pass(es)	Identify one of the following: (Ceremonial Role, Other, or Income)	Description of "Ceremonial Role" or "Other"	Name of Outside Organization (Include address and description)	Number of Describe the public purpose mad Ticket(s)/ Pass(es) pursuant to the agency's policy	of Describe the public purpose made ss(es) pursuant to the agency's policy
Police Department	7	Ticket Policy E.3.e.	Slowey, Jeff	_	Ceremonial Role	Ticket Policy E.3.e.			
			Miller, Steve	_	Ceremonial Role	Ticket Policy E.3.e.			
			Daniels, Bret		Ceremonial Role	Ticket Policy E.3.e.			