## Agency Report of:

## Ceremonial Role Events and Ticket/Pass Distributions

A Public Document

1.	Agency Name				Date Stamp	California 802	
	City of Citrus Heights	y of Citrus Heights				Form OUZ	
Ī	Division, Department, or Region (If Applicable)					For Official Use Only	
ì	Designated Agency Contact (Name, Title)				-		
	Amy Van, City Clerk						
	Area Code/Phone Number   E-mail				Amendment (Must provide explanation in Part 3.)		
	916.727.4704	sheights.net		Date of Original Filing:(Month, Day, Year)			
2.	Function or Event Information					400.00	
[	Does the agency have a ticket policy? Yes ☒ No ☐ Fac				of Each Ticket/Pass \$ _	\$20.00	
E	Event Description Wolf Fest 2017  Provide Title/Explanation			Date(s)10	Date(s) 10 / 7 / 17		
					The Wolf	•	
	Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒			If no: 101.0	If no: 101.9 The Wolf  Name of Source		
١	Was ticket distribution made at the behest No			If yes:			
	of agency official?				Official's Name (Last, First)		
	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 of						
A	A. Name of Agency, Department or Unit		Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy			
	Police Department		6	Pursuant to Ticket Policy Section E.			
Ī	B. Name of Individual  (Last, First)		Number of Ticket(s)/ Pass(es)	Identify one of the following:  Ceremonial Role  Other  Income			
-				If checking "Ceremoni Ceremonial Role	ial Role" or "Other" describe below:	Income	
Ī	Name of Outside Owner	in Alan	Number of	If checking "Ceremoni	al Role" or "Other" describe below:		
_	C. Name of Outside Organization (include address and description)		Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy			
-	Verification			78.00.1		-197-MTM-VI	
	VETITICATION I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set for				orth above, is in accordance wit	th the requirements.	
-	Signature of Agency Head or Designee	Amy Van		City Clerk	10/24/2017		
C	Comment:		⊬nnt Name		Title	(Month, Day, Year)	