

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions RECEIVED
CITY OF PALM SPRINGS
JUN 4 2016
A Public Document

1. Agency Name City of Palm Springs		Date Stamp 2016 MAY -9 AM 9:25	California Form 802
Division, Department, or Region (If Applicable)		JAMES THOMPSON CITY CLERK	For Official Use Only
Designated Agency Contact (Name, Title) Jennifer Nelson, Executive Asst. to Mayor/Council		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: _____ (Month, Day, Year)	
Area Code/Phone Number 760-323-8200	E-mail jennifer.nelson@palm Springsca.gov		

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ _____ **100.00**

Event Description PSAM Meet the Art Museum Date(s) 4 / 8 / 16 _____
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: Palm Springs Art Museum
Name of Source

Was ticket distribution made at the behest of agency official? No Yes If yes: _____
Official's Name (Last, First)

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, Department or Unit	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/Pass(es)	Identify one of the following:
Moon, Rob	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Public Purpose as defined by PS Resolution No. 22454
	2	Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (Include address and description)	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy

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

Signature of Agency Head or Designee

 David H. Ready
 Print Name

 City Manager
 Title

05/05/16
 (Month, Day, Year)

Comment: _____



Superheroes Want Super Food and Drinks!
 And So It Shall Be, Thanks to Lulu, BuzzBox,
 and Crater Lake Vodka!

eleventh annual
MEET THE MUSEUM

THE ART OF JUSTICE

Chairman and Presenter
Mr. Harold Matzner

Friday, April 8, 6-9 p.m.

DRESS AS YOUR FAVORITE COMIC BOOK HERO

*2 fix - Mayor
 100.00 each*

Tim Jochen, MD

**CONTOUR
 DERMATOLOGY**

Lee Erwin, Director

& COSMETIC SURGERY CENTER

Contour Your Life

PRESENTS

MC for the Evening – Palm Springs' Own Bella da Ball!

