

**Agency Report of:
Ceremonial Role Events and
Ticket/Admission Distributions**

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A Public Document

1. Agency Name		'11 DEC 28	A11 934 Stamp	California Form 802
Pasadena Center Operating Company (PCOC)		CITY CLERK CITY OF PASADENA		For Official Use Only
Division, Department, or Region (if applicable)				
Street Address				
300 E. Green Street, Pasadena, CA 91101-2399				
Designated Agency Contact (Name, Title)		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)		
Michael Ross, CEO		Date of Original Filing: _____		
Area Code/Phone Number	E-mail	(month, day, year)		
626-793-2122	info@pasadenacenter.com			

2. Function, Event, or Ceremonial Role Information

Title Distinguished Speakers Series: Face Value of Each Admission \$ 65.00

Description Betty White Date(s) 11 / 09 / 11

Ticket(s)/Admission(s) provided by agency? Yes No If no: Pasadena Civic Auditorium
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?


Yes No If yes: see attached
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	<ul style="list-style-type: none"> Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.
See attached		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>

3. Verification

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

 Michael W. Ross CEO 12/14/11
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.)

Name	# of Tickets	Description of Organization	Address	Purpose of Distribution	Ticket Recipients
Maria Windau	2	PCOC		(9) Attract and retain highly qualified employees	
Gloria Conrad	1	PCOC		(9) Attract and retain highly qualified employees	
Gail Cooper	2	Centerplate/PCOC		(9) Attract and retain highly qualified employees	
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