

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

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1. Agency Name		Date Stamp 11 DEC 28 12:57	California Form 802 For Official Use Only
Pasadena Center Operating Company (PCOC) Division, Department, or Region (if applicable)			
Street Address 300 E. Green Street, Pasadena, CA 91101-2399		CITY CLERK CITY OF PASADENA	
Designated Agency Contact (Name, Title) Michael Ross, CEO			
Area Code/Phone Number (626)793-2122	E-mail info@pasadenacenter.com	<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: _____ (month, day, year)	

2. Function, Event, or Ceremonial Role Information

Title UCLA Football Game/Rose Bowl Face Value of Each Admission \$ 64

Description UCLA vs California Date(s) 10 / 29 / 11

Ticket(s)/Admission(s) provided by agency? Yes No If no: _____
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.
		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 12/21/11
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
Lisa Balelo	7	LW Car Research		(3) Economic or business development purposes on behalf of the City/RBOC/PCOC	
Unused	2			(15) Unused	
	9				