

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

A Public Document

1. Agency Name

Pasadena Center Operating Company (PCOC)
Division, Department, or Region (If Applicable)

Date Stamp
CITY CLERK

California Form **802**

For Official Use Only

Designated Agency Contact (Name, Title)

Michael W. Ross, CEO

Area Code/Phone Number

626-793-2122

E-mail

info@pasadenacenter.com

Amendment (Must provide explanation in Part 3.)

Date of Original Filing: _____
(Month, Day, Year)

2. Function or Event Information

Does the agency have a ticket policy? Yes No

Face Value of Each Ticket/Pass \$ 100-\$200

Event Description UCLA vs Utah
Provide Title/Explanation

Date(s) 10 / 26 / 18

Ticket(s)/Pass(es) provided by agency? Yes No

If no: _____
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
See attached		
B. Name of Individual (Last, First)	Number of Ticket(s)/Pass(es)	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:
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

Michael W. Ross
Print Name

CEO
Title

11/20/18
(Month, Day, Year)

Comment: _____

Name	# of Tickets	Description of Organization	Address	Purpose of Distribution	Ticket Recipients
PCOC Employee Raffle	7	PCOC	Pasadena	10) A City/RBOC/PCOC employee or resident in connection with the competition or drawing	PCOC Employee and guest
Unused	2			16) Unused Tickets	
	9				