| 1. Agency Name  
City of Fresno  
Division, Department, or Region (if Applicable)  
Facilities Management Division  
Designated Agency Contact (Name,Title)  
Robin O'Malley, Facilities Manager  
Area Code/Phone Number  
559-621-1487  
E-mail  
FacilitiesMgmt@fresno.gov |
|---|---|

| 2. Function or Event Information  
Does the agency have a ticket policy?  
Yes ☐ No ☑  
Event Description  
Fresno Grizzlies Baseball Skybox  
Date(s)  
04/12/18  
Face Value of Each Ticket/Pass $  
31.34  
Ticket(s)/Pass(es) provided by agency?  
Yes ☐ No ☑  
Was ticket distribution made at the behest of agency official?  
No ☐ Yes ☑  
Name of Source  
Fresno Baseball, LLC  
Official’s Name (Last, First)  
O’Malley, Robin Facilities Manager |

| 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:  
Ceremonial Role ☐ Other ☐ Income ☐  
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  
|  
|  
|  
| EVERY NEIGHBORHOOD PARTNERSHIP  
Neighborhood Revitalization  
12 |

| 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  
Andrea Pasilla  
Print Name  
Title  
Executive Director  
4/10/18  
(Month, Day, Year)  
Comment:  
|  

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)

FPPC Form 802 (4/12)