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

1. Agency Name
   City of Fresno
   Facilities Management Division
   Designated Agency Contact: 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
   Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐
   Was ticket distribution made at the behest of agency official? No ☐ Yes ☑
   Face Value of Each Ticket/Pass $31.34
   Date(s): 08/10/18
   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
      DARES DEPT
      770 W. SAN PABLO
      FRESNO CA 93728
      12
      Recognition for City of Fresno for their work

   B. Name of Individual
      (Last, First)
      Number of Ticket(s)/Pass(es)
      Identify one of the following:
      Ceremonial Role ☐ Other ☐ Income ☐
      Ceremonial Role ☐ Other ☐ Income ☐
      If checking "Ceremonial Role" or "Other" describe below:
      Ceremonial Role ☐ Other ☐ Income ☐
      Ceremonial Role ☐ Other ☐ Income ☐
      If checking "Ceremonial Role" or "Other" describe below:
      Ceremonial Role ☐ Other ☐ Income ☐
      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

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: Luis Chavez
   Print Name: Councilmember
   Title: 
   Date: 8/1/18
   (Month, Day, Year)
   Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)