

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

A Public Document

<b>1. Agency Name</b>		Date Stamp	<b>California Form 802</b> For Official Use Only
City of Fresno			
Division, Department, or Region (If Applicable)			
Facilities Management Division			
Designated Agency Contact (Name, Title)		<input type="checkbox"/> <b>Amendment</b> (Must provide explanation in Part 3.) Date of Original Filing: _____ <small>(Month, Day, Year)</small>	
Robin O'Malley, Facilities Manager			
Area Code/Phone Number	E-mail		
559-621-1487	FacilitiesMgmt@fresno.gov		

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes     No     Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 31.34

Event Description Fresno Grizzlies Baseball Skybox    Date(s) 05 / 20 / 21  
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency?    Yes     No     If no: Fresno Baseball, LLC  
Name of Source

Was ticket distribution made at the behest of agency official?    No     Yes     If yes: O'Malley, Robin Facilities Manager  
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
<u>MANJAREE MASON CENTER</u>		<u>DONATION</u>
<b>B. Name of Individual</b> <small>(Last, First)</small>		
	Number of Ticket(s)/Pass(es)	Identify one of the following: Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
<b>C. Name of Outside Organization</b> <small>(include address and description)</small>		
	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
	<u>6 TICKETS</u> <u>2 PARKING PASSES</u>	

### 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.

Nicole Linder    NICOLE LINDER    EX. DIRECTOR    5/13/2021  
Signature of Agency Head or Designee    Title Name    Title    (Month, Day, Year)

Cheryl Nicholas    ASSIST TO EX. DIRECTOR

Comment: \_\_\_\_\_