

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

A Public Document

1. Agency Name SEFCEDA		Date Stamp RECEIVED 2023 MAR 13 P 2:17	California Form 802
Division, Department, or Region (if applicable)			For Official Use Only
Designated Agency Contact (Name, Title) Jose Barraza		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _____ (month, day, year)	
Area Code/Phone Number	E-mail joseleonbarraza50@gmail.com		

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ _____ 80

Event Description: Trailblazer 9th Annual Awards Lunch Date(s) 11 / 16 / 22 _____ / _____ / _____
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: _____
Name of Source

Was ticket distribution made at the behest of agency official? Yes No If yes: _____
Official's Name (Last, First)

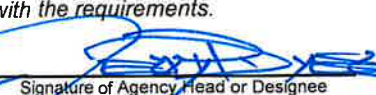
3. Recipients

* 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)/ Passes	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Dyer, Jerry	1	Ceremonial Role <input checked="" type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
Rose, Sontaya	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	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

Jerry P. Dyer
 Print Name

Mayor
 Title

3.13.23
 (month, day, year)

Comment: _____