

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

A Public Document

<b>1. Agency Name</b> Downtown Fresno Partnership Division, Department, or Region (if applicable)		Date Stamp  <div style="text-align: center; color: blue; font-weight: bold; font-size: 1.2em;">RECEIVED</div>	California Form <b>802</b> For Official Use Only
Designated Agency Contact (Name, Title) Marissa Arrequin		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: 7-11-2023 <small>(month, day, year)</small>	
Area Code/Phone Number 559-708-4573	E-mail marissa@downtownfresno.org		

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes     No     Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 50

Event Description: State of Downtown    Date(s) 4 / 21 / 23

*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 type="checkbox"/> Other <input checked="" 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>
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.*

Jerry P Dyer
Mayor
7-11-2023

Signature of Agency Head or Designee      Print Name      Title      (month, day, year)

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