

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

A Public Document

1. Agency Name Fresno Police Department		Date Stamp RECEIVED 2023 MAR 13 P 2:18 CITY OF FRESNO CITY CLERK'S OFFICE	California Form 802
Division, Department, or Region (if applicable)			For Official Use Only
Designated Agency Contact (Name, Title) Diana Vega		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.)	
Area Code/Phone Number	E-mail Diane.Vega@fresno.gov	Date of Original Filing: _____ (month, day, year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ _____ 40

Event Description: Officer of the Year Awards Date(s) 5 / 10 / 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	2	Ceremonial Role <input checked="" type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: Attend with spouse
			Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:
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
3.13.23

Signature of Agency Head or Designee

Print Name

Title

(month, day, year)

Comment: _____

Print

Clear