

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

A Public Document

<b>1. Agency Name</b> City of Fresno		Date Stamp	<b>California Form 802</b> For Official Use Only
Division, Department, or Region (if applicable) General Services Department, Administration Division			
Designated Agency Contact (Name, Title) Martha Serena Jolley, Executive Assistant			
Area Code/Phone Number 559-621-1155	E-mail Martha.Jolley@fresno.gov	<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) 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 \$ 89.00  
Event Description: Fresno Grizzlies Baseball Skybox Date(s) 08/22/2024  
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 Yes ☒ No ☐ If yes: Jolley, Martha Serena, Executive Assistant  
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:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:
		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
FRESNO EOC - Advance Peace Fresno - 1920 Mariposa St.	12	- To encourage Fresno residents to visit & use city facilities
WE ARE NOT INVISIBLE Fresno, CA.	12	and attend city events - Token of appreciation for the services the orgs. provide to residents.

**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.

Gabriela Olea Signature of Agency Head or Designee  
GABRIELA OLEA Print Name  
CHIEF OF STAFF Title  
07/23/2024 (month, day, year)

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

Print

Clear