## Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions **A Public Document**

City of Frésino Division, Department, or Region (if applicable) General Services Department Designated Agency Contact (Name, Title) Evelyn Yambupah, Senior Administrative Clerk Area Code/Phone Number E-mail 559-621-1104  E-wyn. Yambupah@fresno.gov  2. Function or Event Information Does the agency have a ticket policy? Event Description: Boots in the Park - Pitbull Provide Titled Explanation Ticket(s)/Pass(es) provided by agency? Yes No Setton 8 to identify an advised Events  - Vas ticket distribution made at the behest Yes No Section 8 to identify an individual.  - Vas Section A to identify the agency's department or unit - Vas Section 8 to identify an individual.  - A Name of Agency, Department or Unit - Name of Agency, Department or Unit - Name of Individual - Name of Outside Organization - Number of Ticket(s)/Passes - Ceremonial Role   Other   Income - If ceremonial Role   Other	1.	Agency Name				Date Stamp	California 802	
General Services Department  Designated Agency Contact (Name, Title)  Evelyn Yambupah, Senior Administrative Clerk  Area Code/Pone Number   E-mail    559-621-1104   Evelyn.Yambupah@fresno.gov   Date of Original Filling:   (modit. day. year)  2. Function or Event Information  Does the agency have a ticket policy? Yes   No   Face Value of Each Ticket/Pass \$ 225.00  Event Description: Boots in the Park - Pitbull  Date (s) 09/14/2025   09/14/2025    Provide Title/Evaluanation  Ticket(s)/Pass(es) provided by agency? Yes   No   If no: Activated Events  Name of Source   Name (Last, Kiral)  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)  District 7   3		Division, Department, or Region (if applicable)					TOTAL STATE	
Designated Agency Contact (Name, Title)							For Official Use Only	
Evelyn Yambupah, Senior Administrative Clerk Area Code/Phone Number 559-621-1104  Evelyn. Yambupah@fresno.gov  Date of Original Filing:		· · · · · · · · · · · · · · · · · · ·						
Area Code/Phone Number   E-mail		The state of the s						
Evelyn.Yambupah@fresno.gov   Date of Original Filing:						Amendment (Must I	Provide Explanation in Part 3.)	
2. Function or Event Information  Does the agency have a ticket policy? Yes No Date(s) 09/14/2025  Event Description: Boots in the Park - Pitbull  Provide Titled Explanation  Ticket(s)/Pass(es) provided by agency? Yes No Date(s) 09/14/2025  Was ticket distribution made at the behest Yes No Fine Info: Activated Events  Was ticket distribution made at the behest Yes No.  Was ticket distribution made at the behest Yes No.  Was ticket distribution made at the behest Yes No.  Was ticket distribution made at the behest Yes No.  Was ticket distribution made at the behest Yes No.  Was ticket distribution made at the behest Yes No.  Was ticket distribution made at the behest Yes No.  Was ticket distribution made at the behest Yes No.  Was ticket distribution made at the behest Yes No.  Was ticket distribution made at the behest Yes No.  Was ticket distribution made at the behest Yes No.  Name of Agency. Department or Unit.  **Use Section A to identify an individual.**  Of Ticket(s)  Passes  Describe the public purpose made pursuant to the agency's policy of Ticket(s)  Passes  Ceremonial Role Other No.  If dentify one of the following:  Ceremonial Role Other No.  If dentify Toersonal Role of Other Income						D-44 O-1-11 Fill		
Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 225.00  Event Description: Boots in the Park - Pitbull Provide Title/ Explanation  Ticket(s)/Pass(es) provided by agency? Yes No Frick (s)/Pass(es) provided by agency? Yes No Fricket(s)/Pass(es) Pass(es) Pass(e		559-621-1104	21-1104 Evelyn. Yambupan@fresno.gov			(month, day, year)		
Event Description: Boots in the Park - Pitbull    Provide Title/ Explanation	2.							
Ticket(s)/Pass(es) provided by agency? Yes No If no: Activated Events  Was ticket distribution made at the behest Yes No If yes: Callada Captal Captal Official's Name (Last, First)  3. Recipients  *Use Section 8 to identify an individual. Use Section C to identify an outside organization.  A. Name of Agency, Department or Unit District State(s)  B. Name of Individual (Last, First)  B. Name of Individual (Last, First)  B. Name of Individual (Last, First)  Ceremonial Role Other Income If Checking Commonial Role or Other describe below.  C. Name of Outside Organization of Ticket(s)  Passes  C. Name of Outside Organization of Ticket(s)  Passes  Describe the public purpose made pursuant to the agency's policy income Income If Checking Commonial Role or Other describe below.  C. Name of Outside Organization of Ticket(s)  Passes  Describe the public purpose made pursuant to the agency's policy Passes  Describe the public purpose made pursuant to the agency's policy Passes  C. Name of Outside Organization of Ticket(s)  Passes  Describe the public purpose made pursuant to the agency's policy Passes  Describe the public purpose made pursuant to the agency's policy Passes  Describe the public purpose made pursuant to the agency's policy Passes  Number of Outside Organization of Ticket(s)  Passes  Describe the public purpose made pursuant to the agency's policy Passes  Describe the public purpose made pursuant to the agency's policy Passes  Number of Outside Organization of Ticket(s)  Passes  Describe the public purpose made pursuant to the agency is policy passes.  A. Verification  I have read and undorstand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the Call of Agent Passes of Call of Outside			■ No 🗆	Face Value of Each Ticket/Pass \$225.00				
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*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 of Ticket(s) Passes  B. Name of Individual (Last, First)  B. Name of Individual (Last, First)  B. Name of Individual (Last, First)  Ceremonial Role Other Income If checking 'Ceremonial Role' or 'Other' describe below:  C. Name of Outside Organization (Include address and description)  Passes  Obscribe the public purpose made pursuant to the agency's policy of Ticket(s) Passes  Ceremonial Role Other Income If checking 'Ceremonial Role' or 'Other' describe below:  C. Name of Outside Organization of Ticket(s) Passes  Describe the public purpose made pursuant to the agency's policy of Ticket(s) Passes  A. Verification  I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordant with the requirements.  Signature of Agency flead or Designee  Print Name  Tike (month, day, year)	3.	Recipients					):	
A. Name of Agency, Department or Unit of Ticket(s)/ Passes    District 7   3   Staff morrale and appreciated		-						
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B. Name of Individual (Last, First)    Ceremonial Role   Other   Income		A. Name of Agency, Department of Offic					rsuant to the agency's policy	
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Signature of Agendy Flead or Designee Print Name I Title (month, day, yea	<b>4</b> .	I have read and understand FF	A	•		7 20 MH 1907 2 2 3 7	272	
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