

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

A Public Document

1. Agency Name City of Fresno		Date Stamp RECEIVED 2021 JUN 20 P 2:53 CITY OF FRESNO CITY CLERK'S OFFICE	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) Office of the Mayor			
Designated Agency Contact (Name, Title) Krystal Rios			
Area Code/Phone Number 559-621-8000	E-mail Mayor@fresno.gov		
		☐ 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 \$ 150.00
Event Description: Promise Luncheon Date(s) 04 / 16 / 26
Provide Title/Explanation
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: Breaking The Chains
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 ☒ Other ☐ Income ☐ If checking "Ceremonial Role" or "Other" describe below:
Ramirez, Fabiola & Flores, Carmen		Ceremonial Role ☐ Other ☐ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Staffed the Mayor
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 08/20/2026
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: _____

Print

Clear