

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

A Public Document

1. Agency Name City of Fresno		Date Stamp RECEIVED 2016 SEP 23 A 10:23	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.) CITY CLERK'S OFFICE 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 \$ 25.00
Event Description: Sons In Retirement Monthly Luncheon Date(s) 09 / 10 / 26
Provide Title/Explanation
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: Sons In Retirement Branch 159
Name of Source
Was ticket distribution made at the behest of agency official? Yes ☐ No ☒ If yes: _____
Official's Name (Last, First)

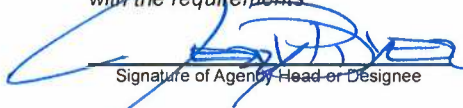
3. Recipients

• 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 & Montelongo, Chris	2	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Staffed 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 09/25/2026
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: _____

Print

Clear