

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

A Public Document

1. Agency Name City of Sonoma		Date Stamp RECEIVED JUL 12 2019	California Form 802 For Official Use Only
Division, Department, or Region (if applicable)			
Designated Agency Contact (Name, Title) Rebekah Barr, MMC, City Clerk		SONOMA CITY CLERK	
Area Code/Phone Number 707.933.2216	E-mail rbarr@sonomacity.org	<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 \$ 12.00

Event Description: Sonoma Stompers Game Date(s) 06 / 01 / 19
Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: Sonoma Stompers Organization
Name of Source

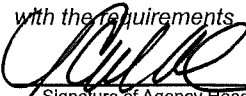
Was ticket distribution made at the behest of agency official? Yes No If yes: _____
Official's Name (Last, First)

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
Public Works	2	C.19 - Promoting enhanced City employee performance and morale
Administration	4	C.19 Promoting enhanced City employee performance and morale
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Harrington, Amy	2	Ceremonial Role <input checked="" type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: C.1 Mayor - Throwing out first pitch.
Harvey, Logan	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: C.12 Promotion of City recognition...
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.

 _____
 Signature of Agency Head or Designee Print Name Title 07/12/19
(month, day, year)

Comment: _____