

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

A Public Document

1. Agency Name City of Long Beach <hr/> Division, Department, or Region (if applicable) City Manager's Office <hr/> Designated Agency Contact (Name, Title) Tom Modica, Assistant City Manager <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:50%; border: none;">Area Code/Phone Number</td> <td style="width:50%; border: none;">E-mail</td> </tr> <tr> <td style="border: none;">562-570-5091</td> <td style="border: none;">tom.modica@longbeach.gov</td> </tr> </table>		Area Code/Phone Number	E-mail	562-570-5091	tom.modica@longbeach.gov	Date Stamp	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">California Form 802</td> </tr> <tr> <td style="text-align: center; font-size: small;">For Official Use Only</td> </tr> </table>	California Form 802	For Official Use Only
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		<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 \$ 100

Event Description: ASICS World Series of Beach Volleybl Date(s) 7 / 15 / 17 7 / 16 / 17
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: Convention and Visitor's Bureau
Name of Source

Was ticket distribution made at the behest of agency official? Yes No If yes: Modica, Tom
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
See Attachment.		
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

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.

<div style="background-color: black; width: 100%; height: 20px; margin-bottom: 5px;"></div> Signature of Agency Head or Designee	Tom Modica Print Name	Assistant City Manager Title	8/1/17 (month, day, year)
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Comment: _____

