

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

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1. Agency Name CITY OF NEWPORT BEACH		Date Stamp 2016 MAY 2 AM 8:55	California Form 802 For Official Use Only
Division, Department, or Region (If Applicable)			
Designated Agency Contact (Name, Title) David A. Kiff, City Manager		CITY OF NEWPORT BEACH	
Area Code/Phone Number 949-644-3005	E-mail lbrown@newportbeachca.gov	<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 \$ 150.00

Event Description NB Film Festival Honors & Awards Date(s) 4 / 23 / 16
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: Newport Beach Film Festival
Name of Source

Was ticket distribution made at the behest of agency official? No Yes 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)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/Pass(es)	Identify one of the following:
Dixon, Diane	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: Pursuant to Ticket Policy (Council Policy F-27)/Promotion of City-Sponsored Event
Muldoon, Kevin	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: Pursuant to Ticket Policy (Council Policy F-27)/Promotion of City-Sponsored Event
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/Pass(es)	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.


 _____ David A Kiff _____ City Manager _____ 5/10/16 _____
Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

Comment: _____

**Agency Report of:
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Continuation Sheet**

Agency Name

CITY OF NEWPORT BEACH

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)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual <small>(Last, First)</small>	Number of Ticket(s)/ Pass(es)	Identify one of the following:
Curry, Keith	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i> Pursuant to Ticket Policy (Council Policy F-27)/Promotion of City-Sponsored Event
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i> Pursuant to Ticket Policy (Council Policy F-27)/Promotion of City-Sponsored Event
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
C. Name of Outside Organization <small>(include address and description)</small>	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy