

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

RECEIVED A Public Document

1. Agency Name		Date Stamp	California Form 802
CITY OF NEWPORT BEACH		2012 MAY 21 PM 3:	For Official Use Only
Division, Department, or Region (if applicable)		OFFICE OF THE CITY CLERK CITY OF NEWPORT BEACH	
Street Address			
3300 Newport Boulevard, Newport Beach, CA 92663		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
Designated Agency Contact (Name, Title)		Date of Original Filing: _____ (month, day, year)	
David A. Kiff, City Manager			
Area Code/Phone Number	E-mail		
949-644-3005	lbrown@newportbeachca.gov		

2. Function, Event, or Ceremonial Role Information

Title Newport Beach Film Festival Face Value of Each Admission \$ 40.00

Description Showcases Date(s) 04 / 27 / 2012 05 / 01 / 2012

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

Was the distribution to persons identified below made at the behest of an agency official?


Yes No If yes: _____
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	Income
See attached list		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Promotion of City-sponsored Event Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>

3. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

 David A. Kiff City Manager 5/10/12
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

SHOWCASE MOVIES

<u>Ticket Recipient</u>	<u>Department</u>	<u># of Tkts</u>
Keith Curry	City Council	6
Leslie Daigl	City Council	2
Keith Curry	City Council	2
Rush Hill	City Council	2
Christopher Trela	Arts Commissioner	2
Total		14