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

1. Agency Name
CITY OF NEWPORT BEACH
Division, Department, or Region (If Applicable)

Designated Agency Contact (Name, Title)
David A. Kiff, City Manager

Area Code/Phone Number 949-644-3005
E-mail ibrown@newportbeachca.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No ☐
Face Value of Each Ticket/Pass $ 35.00
Event Description Newport-Mesa Spirit Run
Provide Title/Explanation
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
Date(s) 03/03/13
Was ticket distribution made at the behest of agency official? Yes ☐ No ☑
Name of Source
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
--- | --- | ---
Community Development Department | 1 | Pursuant to Ticket Policy (Policy F-27)/Promotion of City-sponsored Event
City Clerk’s Office | 1 | Pursuant to Ticket Policy (Policy F-27)/Promotion of City-sponsored Event

B. Name of Individual (Last, First) | Number of Ticket(s)/Pass(es) | Identify one of the following:
--- | --- | ---
Petros, Tony | | Ceremonial Role ☐ Other ☑ Income ☐
If checking “Ceremonial Role” or “Other,” describe below:
Pursuant to Ticket Policy (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.

Signature of Agency Head or Delegate __________________________
Print Name __________________________ Title __________________________
Date 3/26/13

Comment: __________________________

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
### A. Name of Agency, Department or Unit

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>City Attorney's Office</td>
<td>1</td>
<td>Pursuant to Ticket Policy (Policy F-27)/Promotion of City-sponsored Event</td>
</tr>
<tr>
<td>Municipal Operation Department</td>
<td>1</td>
<td>Pursuant to Ticket Policy (Policy F-27)/Promotion of City-sponsored Event</td>
</tr>
<tr>
<td>Recreation and Senior Services</td>
<td>1</td>
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</tr>
</tbody>
</table>

### B. Name of Individual

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</tbody>
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**If checking "Ceremonial Role" or "Other" describe below:**

### C. Name of Outside Organization

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<th>Name of Outside Organization (include address and description)</th>
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