**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 lbrown@newportbeachca.gov

2. **Function or Event Information**
   - Does the agency have a ticket policy? Yes ☑ No ☐
   - Face Value of Each Ticket/Pass $ 70.00
   - Event Description Film Festival Closing Ceremony/Party
   - Date(s) 05/02/13
   - 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**

   **Number of Ticket(s)/Pass(es)**

   **Ceremonial Role ☐ Other ☑ Income ☐**

   **Identify one of the following:**

   Pursuant to Ticket Policy (Policy F-27)/Promotion of City-sponsored Event

   **C. Name of Outside Organization**

   **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 Designee**
   - David A. Kiff
   - City Manager

   **Print Name**
   - Title

   **Comment:**

   FPPC Form 802 (4/12)
   FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)