

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

A Public Document

<p>1. Agency Name CITY OF SAN MARCOS Division, Department, or Region (if applicable) CITY CLERK DEPARTMENT Designated Agency Contact (Name, Title) PHIL SCOLICK, CITY CLERK</p>		<p>Date Stamp</p>	<p>California Form 802 For Official Use Only</p>
<p>Area Code/Phone Number E-mail</p> <p>(760) 744-1050 PSCOLICK@SAN-MARCOS.NET</p>		<p><input type="checkbox"/> Amendment <i>(Must Provide Explanation in Part 3.)</i></p> <p>Date of Original Filing: <u>2/27/2025</u> <i>(month, day, year)</i></p>	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 95.00

Event Description: NECA GALA Date(s) 01/11/2025

Ticket(s)/Pass(es) provided by agency? Yes No If no: _____

Was ticket distribution made at the behest Yes No If yes: _____
of agency official? _____
Name or 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)/Passes	Describe the public purpose made pursuant to the agency's policy		
B.	Name of Individual (Last, First)	Number of Ticket(s)/Passes	Identify one of the following:		
	LEBLANG, DANEILLE; SANNELLA, MIKE; JONES, REBECCA		Ceremonial Role <input checked="" type="checkbox"/>	Other <input type="checkbox"/>	Income <input type="checkbox"/>
			<i>If checking "Ceremonial Role" or "Other" describe below:</i>		
			PUBLIC PURPOSE FOR INTERGOVERNMENTAL RELATIONS		
			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 (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.

hBene

MICHELLE BENDER

CITY MANAGER

Signature of Agency Head or Designee

Print Name

Title

(month, day, year)

Comment: _____

Print

Clear

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

**California
Form 802
A Public Document**

Agency Name
CITY OF SAN MARCOS

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
B.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
			<input type="checkbox"/> Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <small>If checking "Ceremonial Role" or "Other" describe below:</small>
			<input type="checkbox"/> Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <small>If checking "Ceremonial Role" or "Other" describe below:</small>
			<input type="checkbox"/> Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <small>If checking "Ceremonial Role" or "Other" describe below:</small>
			<input type="checkbox"/> Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <small>If checking "Ceremonial Role" or "Other" describe below:</small>
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

Print

Clear