Agency Report of Ceremonial Role	: Events and Tid	ket/Pa	ass Distr	CTTY (ibutions CI	F WHITTIER TY CLERK A	Public Document	
1. Agency Name					Date Stamp	California 802	
City of Whittier 2023 NOV					29 PM 2: 39	101111	
Division, Department, or Region (if applicable)					21 10 2 31	For Official Use Only	
Administration							
Designated Agency Contact (Name, Title)							
Brian Saeki, City Manager					Amendment (Must Pr	rovide Explanation in Part 3.)	
Area Code/Phone Number E-mail					Tanionanion (maser rovide Explanation in range)		
562-567-9301	bsaeki@cit	bsaeki@cityofwhittier.org			Date of Original Filing:(month, day, year)		
2. Function or Even	t Information						
Does the agency ha	ve a ticket policy?	Yes 🛭	No □ F	Face Value of I	Each Ticket/Pass \$ <u>75</u>	.00	
Event Description: $\frac{1}{2}$	light at the Museum	Title/ Explan	[	Date(s)11/	06 _ 23		
Was ticket distribution made at the behest Yes ☐ No ☒ If yes:					Name of Source		
of agency official?	on made at the behe	st Yes [	] No 🛛 '	If yes:	Official's Name (Last, First)	<del>-,</del> ,	
3. Recipients  • Use Section A to identify	y the agency's department	or unit. • U	Use Section B to	identify an individ	ual. • Use Section C to identi	ify an outside organization.	
A. Name of Age	ncy, Department or Unit		Number of Ticket(s)/ Passes	Describe th	e public purpose made purs	suant to the agency's policy	
B. Na	ne of Individual (Last, First)		Number of Ticket(s)/ Passes		Identify one of the fo	ollowing:	
	(2001, 1 1100)		rasses	Coron	nonial Role Other X	Income	
Vinatieri, Joe Warner, Cathy,			2	If checking "Ceremonial Role" or "Other" describe below:			
				Attendee			
Saeki, Brian Martinez, Octavio Cesar			2	Ceremonial Role  Other  Income  Income  Attendee			
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			
info@whittiermuseum.org						ams available to the city no-profit organizations	
4. Verification							
I have read and under with the requirements.	stand FPPC Regulatio	ns 18944.	.1 and 18942	. I have verified	that the distribution set fo	orth above, is in accordance	
Bria			an Saeki		City Manager	11/29/23	
Signature of Agency Hea	d or Designee		int Name		Title	(month, day, year)	
Comment:							