

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

CITY OF WHITTIER
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1. Agency Name		Date Stamp	California Form 802
City of Whittier		2024 FEB 21 AM 7:42	For Official Use Only
Division, Department, or Region <i>(if applicable)</i>			
Administration			
Designated Agency Contact <i>(Name, Title)</i>		<input type="checkbox"/> Amendment <i>(Must Provide Explanation in Part 3.)</i> Date of Original Filing: _____ <i>(month, day, year)</i>	
Brian Saeki, City Manager			
Area Code/Phone Number	E-mail		
(562) 567-9301	bsaeki@cityofwhittier.org		

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 125 each

Event Description: 2024 State of the County Event Date(s) 01 / 10 / 24
Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: Commerce Business Council
Name of Source

Was ticket distribution made at the behest of agency official? Yes No 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)/ Passes	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual <i>(Last, First)</i>	Number of Ticket(s)/ Passes	Identify one of the following:
Vinatieri, Joe Warner, Cathy Martinez, Octavio	3	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i> Attendees.
Dutra, Fernando / Saeki, Brian / Bar, Aviv DeLong, Shannon / Maghsoudi, Paymaneh	5	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i> Attendees.
C. Name of Outside Organization <i>(include address and description)</i>	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
Commerce Business Council 6121 E. Telegraph Rd, Commerce, CA 90040		4.e- promotion of community programs available to the city residents, including charitable and non-profit organizations

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.

_____ *Brian Saeki* _____ *City Manager* _____ *1/21/24*
 Signature of Agency Head or Designee Print Name Title (month, day/ year)

Comment: _____