

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

CITY OF WHITTIER
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1. Agency Name		Date Stamp 2024 MAY -9 AM 9: 26	California Form 802 For Official Use Only
City of Whittier			
Division, Department, or Region (if applicable)			
Administration			
Designated Agency Contact (Name, Title)			
Brian Saeki, City Manager			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.)	
(562) 567-9301	bsaeki@cityofwhittier.org	Date of Original Filing: _____ (month, day, year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 65.00

Event Description: Whittier Reads 2024 with Eric N. Date(s) 04 / 25 / 24
Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: Whittier Public Library Foundation
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 (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Warner, Cathy Martinez, Octavio Cesar	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Attendees.
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <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
Whittier Public Library Foundation whittierplf.org		4.e-Promotion of community programs available to city residents, including charitable and nonprofit 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
05-8-24

Signature of Agency Head or Designee
Print Name
Title
(month, day, year)

Comment: _____