

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

**A Public Document**

<b>1. Agency Name</b> City of Whittier		CITY OF WHITTIER CITY CLERK - TREASURER Date Stamp: <b>17 FEB 16 PM 2:12</b>	<b>California Form 802</b> For Official Use Only
Division, Department, or Region (if applicable) Administration		<input type="checkbox"/> <b>Amendment</b> (Must Provide Explanation in Part 3.)	Date of Original Filing: _____ <small>(month, day, year)</small>
Designated Agency Contact (Name, Title) Jeffrey W. Collier, City Manager			
Area Code/Phone Number (562) 567-9301	E-mail jcollier@cityofwhittier.org		

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes     No     Face Value of Each Ticket/Pass \$ 225

Event Description: Heart of a Child Gala    Date(s) 4 / 5 / 14  
Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency?    Yes     No     If no: The Whole Child  
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:
Dutra, Fernando	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below.</small> Attendee
Warner, Cathy	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below.</small> 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
The Whole Child thewholechild.org	2	4. Promotion of community programs available to city residents, including charitable & 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.

	Jeffrey W. Collier	City Manager	<u>2-15-17</u>
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(month, day, year)</small>

Comment: \_\_\_\_\_