

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

A Public Document

1. Agency Name City of Dana Point		RECEIVED 2021 DEC -1 AM 11:07 CITY OF DANA POINT CITY CLERK'S DEPARTMENT	California Form 802 For Official Use Only
Division, Department, or Region (if applicable)			<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: <u>12/1/21</u> <small>(month, day, year)</small>
Designated Agency Contact (Name, Title) Shayna Sharke, City Clerk			
Area Code/Phone Number 949/248-3505	E-mail ssharke@danapoint.org		

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 179.00

Event Description: BIAOC Installation Gala Date(s) 11 / 12 / 21
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: BIAOC
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
Mayor Pro Tem	1	Promotion of open government by City Officials appearances at...
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Muller, Joseph L.	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> Promotion of open government by City Officials appearances at...
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.

 Signature of Agency Head or Designee	Shayna Sharke Print Name	City Clerk Title	12/1/2021 (month, day, year)
--	-----------------------------	---------------------	---------------------------------

Comment: _____