

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

A Public Document

<b>1. Agency Name</b> City of Salinas		Date Stamp <b>CITY OF SALINAS</b>  <b>OCT 19 2015</b>	<b>California Form 802</b> For Official Use Only
Division, Department, or Region (If Applicable)  City Clerk's Office		<b>CITY CLERKS OFFICE</b>	
Designated Agency Contact (Name, Title)  Patricia M. Barajas, City Clerk			
Area Code/Phone Number (831) 758-7381	E-mail patricib@ci.salinas.ca.us	<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: <u>10/19/15</u> <small>(Month, Day, Year)</small>	

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes     No       Face Value of Each Ticket/Pass \$ 35.00

Event Description Salinas Valley Food and Wine Festival      Date(s) 10 / 17 / 15  
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency?    Yes     No       If no: Salinas Valley Food and Wine Festival Committee  
Name of Source

Was ticket distribution made at the behest of agency official?    No     Yes       If yes: Patricia M. Barajas  
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.

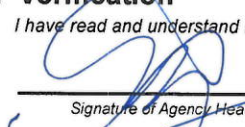
A. Name of Agency, Department or Unit	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
Administration	4	Promotion of events and activities supported by the City
Community Development	2	Promotion of events and activities supported by the City

B. Name of Individual <small>(Last, First)</small>	Number of Ticket(s)/Pass(es)	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		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 <small>(include address and description)</small>	Number of Ticket(s)/Pass(es)	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.

 <small>Signature of Agency Head or Designee</small>	<u>Patricia M. Barajas</u> <small>Print Name</small>	<u>City Clerk</u> <small>Title</small>	<u>10/19/15</u> <small>(Month, Day, Year)</small>
---	---	---	--

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

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

Agency Name  
 City of Salinas

**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)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy
Finance	2	Promotion of events and activities supported by the City
Legal	4	Promotion of events and activities supported by the City
Public Works	2	Promotion of events and activities supported by the City
B. Name of Individual <i>(Last, First)</i>	Number of Ticket(s)/ Pass(es)	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below.</i>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below.</i>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below.</i>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below.</i>
C. Name of Outside Organization <i>(include address and description)</i>	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy

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

**A Public Document**

<b>1. Agency Name</b> City of Salinas		Date Stamp <b>CITY OF SALINAS</b>  <b>OCT 19 2015</b>	<b>California Form 802</b> For Official Use Only
Division, Department, or Region <i>(If Applicable)</i>  City Clerk's Office		<b>CITY CLERKS OFFICE</b>	
Designated Agency Contact <i>(Name, Title)</i> Patricia M. Barajas, City Clerk			
Area Code/Phone Number (831) 758-7381	E-mail patricib@ci.salinas.ca.us	<input type="checkbox"/> Amendment <i>(Must provide explanation in Part 3.)</i> Date of Original Filing: <u>10/19/15</u> <i>(Month, Day, Year)</i>	

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes     No       Face Value of Each Ticket/Pass \$ 55.00

Event Description Salinas Valley Food and Wine Festival      Date(s) 10 / 17 / 15  
*Provide Title/Explanation*

Ticket(s)/Pass(es) provided by agency?    Yes     No       If no: Salinas Valley Food and Wine Festival Committee  
*Name of Source*

Was ticket distribution made at the behest of agency official?    No     Yes       If yes: Patricia M. Barajas  
*Official's Name (Last, First)*

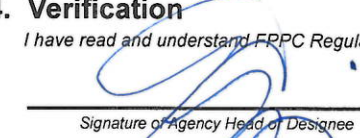
**3. Recipients**

• 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)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual <i>(Last, First)</i>	Number of Ticket(s)/Pass(es)	Identify one of the following:
Gloria De La Rosa	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i> Promotion of events and activities supported by the City
Steve McShane	2	Ceremonial Role <input checked="" type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i> Food and Wine Festival Committee Member; promotion of events and activities supported by the City
C. Name of Outside Organization <i>(include address and description)</i>	Number of Ticket(s)/Pass(es)	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.*

	Patricia M. Barajas	City Clerk	10/19/15
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(Month, Day, Year)</small>