

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

A Public Document

|  |  |   |   |
|--|--|---|---|
| <b>1. Agency Name</b><br>City of Long Beach<br>Division, Department, or Region (if applicable)<br>City Manager's Office<br>Designated Agency Contact (Name, Title)<br>Tom Modica, City Manager<br>Area Code/Phone Number<br>562-570-5091<br>E-mail<br>Tom.Modica@longbeach.gov |  | Date Stamp<br><b>RECEIVED</b><br>CITY CLERK<br>LONG BEACH, CA<br>Tue Jun 20 2023 10:37:<br><input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.)<br>Date of Original Filing: _____<br>(month, day, year) | <b>California Form 802</b><br>For Official Use Only |
|--|--|---|---|

**2. Function or Event Information**

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass \$ 36.95  
Event Description: General Admission Provide Title/ Explanation Date(s) 3 / 25 / 23 12 / 31 / 23  
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: \_\_\_\_\_  
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.

|           |  |                             |  |
|-----------|--|-----------------------------|--|
| <b>A.</b> | Name of Agency, Department or Unit                             | Number of Ticket(s)/ Passes | Describe the public purpose made pursuant to the agency's policy   |
|           |  |                             |  |
|           |  |                             |  |
| <b>B.</b> | Name of Individual (Last, First)                               | Number of Ticket(s)/ Passes | Identify one of the following:   |
|           |  |                             | Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/><br>If checking "Ceremonial Role" or "Other" describe below: |
|           | See attachment.  |                             |  |
|           |  |                             | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/><br>If checking "Ceremonial Role" or "Other" describe below:            |
| <b>C.</b> | 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

inda F. Tatum

Print Name

Assistant City Manager

Title

6/16/23  
(month, day, year)

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

Print

Clear

| Name                   | Address | Number of Tickets | Reason                               |
|------------------------|---------|-------------------|--------------------------------------|
| Soto, Kassandra        |         | 2                 | Other - #9 on the City Ticket Policy |
| Thomas, Essie          |         | 2                 | Other - #9 on the City Ticket Policy |
| Heisner-Rowell, Joanne |         | 2                 | Other - #9 on the City Ticket Policy |
| Kusik, Suzanne         |         | 2                 | Other - #9 on the City Ticket Policy |