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

A Public Document

1. Agency Name			Date S	tamp Calif	ornia 802	
City of Long Beach - D Division, Department, or Regi	evelopment Servi	ices		IVED	For Official Use Onl	
City Manager's Office	( 2//)		LONG BI	CLERK EACH, CA		
Designated Agency Contact (	Vame, Title)		Tue May 02	2 2023 15:50:		
Tom Modica, City Manager				Amendment (N	Must Provide Explanation in Part 3.)	
Area Code/Phone Number	Area Code/Phone Number E-mail			4/27/2023		
562-570-5091	Tom.Modica@long	gbeach.gov		Date of Original Fil	ing:(month, day, year)	
2. Function or Event Inform	nation					
Does the agency have a tick	1 1 1 1 1 1 1 1			Each Ticket/Pass	\$ _\$36.95	
Event Description: General	Admission		Date(s)	27 , 2023	07 <sub>/</sub> 31 <sub>/</sub> 2023	
Ticket(s)/Pass(es) provided l	Provide Title/ Expla	anation □ No 🗴 I	f no: Aquariu	m of the Pacific		
ricket(3)/1 ass(es) provided t	by agency: Tes	L NOKI 1	1110.	Name of Source		
Was ticket distribution made	at the behest Yes	□ No⊠ I	f yes:	Official's Name (Last, F	First)	
of agency official?						
3. Recipients						
Use Section A to identify the agence	cy's department or unit.	• Use Section B to i	identify an individu	ual. Use Section C to ic	dentify an outside organization.	
A. Name of Agency, Depa	A. Name of Agency, Department or Unit		Describe th	the public purpose made pursuant to the agency's police		
		Passes				
		Number				
				Identify one of	the following:	
(Last, Firs	9	Passes	Cerem	nonial Role Oth	ner 🔻 Inco	
Medina, Silvia 7840 Birchcrest R	Medina, Silvia 7840 Birchcrest Rd. Downey CA 90240			If checking "Ceremonial Role" or "Other" describe below: #9 on ticket policy		
			#9 on			
			15/70/74		ner 🗌 Inco	
			If check	king "Ceremonial Role" or "Oth	her" describe below:	
		Number				
	C. Name of Outside Organization (include address and description)		Describe th	e public purpose made	e pursuant to the agency's pol	
		Passes				
Ti i						
4. Verification				,		
	gulations 1894	4.1 and 18942.	I have verified	that the distribution s	set forth above, is in accord	
	1	1 0			chh	
	1 om 1	Print Name		Title Title	(month, day, y	
	,			<u> </u>		
Comment:						

2/2016) 5-3772)

Print

Clear

FPPC Form 802 (7 FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275