

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

A Public Document

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

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass \$ varies
Event Description: Vaccine Incentive Giveaway Date(s) 5 / 17 / 21 8 / 6 / 21
Provide Title/Explanation
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: Various Long Beach Hotels (see list)
Name of Source
Was ticket distribution made at the behest of agency official? Yes ☒ No ☐ If yes: Modica, Tom
Official's Name (Last, First)

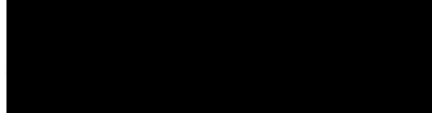
3. Recipients

• 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
			Encouraging participants in City sponsored programs to attend local events. (#13 on City Ticket Policy)
B.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	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 (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

 Tom Modica City Manager
Print Name Title
8/5/21
(month, day, year)

Comment: _____

Hotel Vaccine Incentive Packages

Hilton - 2 Nights

701 W. Ocean Blvd.
Long Beach, CA 90831

Hotel Maya – 2 Nights

700 Queensway Drive
Long Beach, CA 90802

Westin – 2 Nights + \$100 to Navy Proof

333 E. Ocean Blvd.
Long Beach, CA 90802

Hyatt – 2 Nights

200 S. Pine Avenue
Long Beach, Ca 90802

Hyatt Centric – 2 Nights

285 Bay Street
Long Beach, CA 90802

Long Beach Marriott – 2 Nights

4700 Airport Plaza Drive
Long Beach, CA 90815

Renaissance Hotel – 1 Night

111 E. Ocean Blvd.
Long Beach, CA 90802

Courtyard Marriott - 2 Nights

500 E. 1st Street
Long Beach, CA 90802

Residence Inn by Marriott – 1 Night + Comp parking

600 Queensway Drive
Long Beach, CA 90802

Holiday Inn – 2 Nights (only 1-night given out?)

2640 N. Lakewood Blvd.
Long Beach, CA 90815

Staybridge Suites – 2 Nights

2680 N. Lakewood Blvd.
Long Beach, CA 90815

Golden Sails – 2 Nights

6285 Pacific Coast Highway
Long Beach, CA 90803

Because of the private nature of vaccine status and HIPAA protections, we will not be attaching individual names of voucher recipients.