

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

A Public Document

1. Agency Name		RECEIVED Date Stamp SEP 27 2011	California Form 802 For Official Use Only
City of Atascadero			
Division, Department, or Region (if applicable)		CITY OF ATASCADERO	
City Manager's Office			
Street Address		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: <u>09/23/2011</u> (month, day, year)	
6907 El Camino Real, Atascadero, CA 93422			
Designated Agency Contact (Name, Title)			
Wade McKinney, City Manager			
Area Code/Phone Number	E-mail		
805-470-3400	wmckinney@atascadero.org		

2. Function, Event, or Ceremonial Role Information

Title Savor the Central Coast Face Value of Each Admission \$ 137.38

Description Main Event weekend passes to Date(s) 09/29/11 10/02/11

Ticket(s)/Admission(s) provided by agency? Yes No If no: _____
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes No If yes: Wade McKinney, City Manager
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	<ul style="list-style-type: none"> Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.
McKinney, Wade	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	To work the booth & attend the event Income <input type="checkbox"/>
Gesell, Steve <i>Corgill, Jeri</i>	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	To work the booth & attend the event Income <input type="checkbox"/>
Cherry, Brady	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	To work the booth & attend the event Income <input type="checkbox"/>
Martin, Steve, Atascadero Main St	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	To work the booth & attend the event Income <input type="checkbox"/>
O'Malley, Tom	1	Yes <input type="checkbox"/> No <input type="checkbox"/>	To work the booth & attend the event Income <input type="checkbox"/>

3. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

Wade G. McKinney Wade McKinney City Manager 9/26/2011
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

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1. Agency Name		Date Stamp	California Form 802 For Official Use Only
City of Atascadero		SEP 27 2011	
Division, Department, or Region (if applicable)		CITY OF ATASCADERO CITY CLERK'S OFFICE	
City Manager's Office			
Street Address			
6907 El Camino Real, Atascadero, CA 93422			
Designated Agency Contact (Name, Title)		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
Wade McKinney, City Manager		Date of Original Filing: <u>09/23/2011</u> (month, day, year)	
Area Code/Phone Number	E-mail		
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Sturtevant, Brian	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	To work the booth & attend the event	Income <input type="checkbox"/>
Fonzi, Roberta <u>Taylor, Callie</u>	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	To work the booth & attend the event	Income <input type="checkbox"/>
Clay, Jerry	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	To work the booth & attend the event	Income <input type="checkbox"/>
Kelley, Bob	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	To work the booth & attend the event	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>		Income <input type="checkbox"/>

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