

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

**A Public Document**

<b>1. Agency Name</b> City of Atascadero Division, Department, or Region <i>(if applicable)</i> City Manager's Office/City Council Street Address 6907 El Camino Real Designated Agency Contact <i>(Name, Title)</i> Wade McKinney Area Code/Phone Number      E-mail 805-470-3400                      wmckinney@atascadero.org		Date Stamp <b>RECEIVED</b>  OCT - 5 2012  CITY OF ATASCADERO CITY CLERK'S OFFICE <input type="checkbox"/> Amendment <i>(Must provide explanation in Part 3.)</i>  Date of Original Filing: <u>10/1/2012</u> <i>(month, day, year)</i>	<b>California Form 802</b> For Official Use Only
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**2. Function, Event, or Ceremonial Role Information**

Title Savor the Central Coast                      Face Value of Each Admission \$ 106.49  
 Description Promotions-Tourism Event                      Date(s) 09 / 27 / 12                      09 / 30 / 12

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"> <li>• 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.</li> <li>• If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.</li> </ul>
Clay, Jerry - City Council Member	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	work booth / attend event      Income <input type="checkbox"/>
Kelley, Bob - City Council Member	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	work booth / attend event      Income <input type="checkbox"/>
Sturtevant, Brian - City Council Membe	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	work booth / attend event      Income <input type="checkbox"/>
Lewis, Jim - Ass't City Manager	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	work booth / attend event      Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	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 G McKinney                      City Manager                      10-05-2012  
 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.)*