

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

A Public Document

1. Agency Name		Date Stamp	California Form 802
City of Atascadero			For Official Use Only
Division, Department, or Region (If Applicable)			
City Manager's Office			
Designated Agency Contact (Name, Title)		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: _____ <small>(Month, Day, Year)</small>	
Marcia McClure Torgerson, City Clerk			
Area Code/Phone Number	E-mail		
805-470-3400			

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ _____ 75.00

Event Description Central Coast Economic Forecast Date(s) 6 / 6 / 13
Provide Title/Explanation

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

Was ticket distribution made at the behest of agency official? No Yes If yes: McKinney, Wade (City Manager)
Official's Name (Last, First)

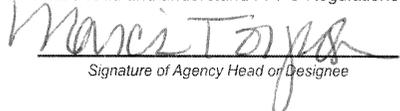
3. Recipients

• 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)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
City Council & City Manager's Office	8	City official representation at the Central Coast Economic Forecast Mid-Year Update
B. Name of Individual <small>(Last, First)</small>		
O'Malley, Tom; Fonzi, Roberta; Moreno, Heather.		Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Agency Officials (City Council Members)
Rickard, Rachelle; Torgerson, Marcia; Thompson, Russ; Frace, Warren; Rangel, Jeri.		Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Agency Officials (City Officials)
C. Name of Outside Organization <small>(include address and description)</small>		

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 with the requirements.

	Marcia McClure Torgerson	City Clerk/Ass't to City Manager	07-23-2014
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(Month, Day, Year)</small>

Comment: _____