

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

A Public Document

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|--|---------------------|---|----------------------------|
| 1. Agency Name | | Date Stamp | California Form 802 |
| City of Irvine | | | For Official Use Only |
| Division, Department, or Region <i>(if applicable)</i> | | | |
| Designated Agency Contact <i>(Name, Title)</i> | | | |
| Oliver Chi, City Manager | | <input type="checkbox"/> Amendment <i>(Must Provide Explanation in Part 3.)</i> Date of Original Filing: _____ <small><i>(month, day, year)</i></small> | |
| Area Code/Phone Number | E-mail | | |
| 949-724-6000 | cm@cityofirvine.org | | |

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ _____ \$5.00-\$60.00

Event Description: Irvine Nights at Great Park Live Date(s) 06 / 22 / 2024 _____ / _____ / _____
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? Yes No If yes: _____
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 |
|---|-----------------------------|---|
| City of Irvine - Various Departments (see attachment) | 113 | Ticket Policy: 6.3.m.: Attracting and retaining highly qualified employees in City service; recognizing or rewarding meritorious service by City employees |
| | | |
| B. Name of Individual <small><i>(Last, First)</i></small> | Number of Ticket(s)/ Passes | Identify one of the following: |
| | | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small><i>If checking "Ceremonial Role" or "Other" describe below:</i></small> |
| | | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small><i>If checking "Ceremonial Role" or "Other" describe below:</i></small> |
| | | |
| C. Name of Outside Organization <small><i>(include address and description)</i></small> | 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 with the requirements.

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|---|---------------------------|----------------------|--|
| <i>Oliver Chi</i> | Oliver C. Chi | City Manager | 08/02/2024 |
| <small>Signature of Agency Head or Designee</small> | <small>Print Name</small> | <small>Title</small> | <small><i>(month, day, year)</i></small> |

Comment: _____

