

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

A Public Document

1. Agency Name City of Grover Beach		Date Stamp CITY OF GROVER BEACH	California Form 802
Division, Department, or Region (If Applicable)		NOV 20 2014	For Official Use Only
Designated Agency Contact (Name, Title) Robert Perrault, City Manager		RECEIVED	
Area Code/Phone Number (805) 473-4567	E-mail rperrault@grover.org	<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: 11/20/2014 <small>(Month, Day, Year)</small>	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 150.00

Event Description Savor the Central Coast Date(s) 09 / 27 / 14 09 / 28 / 14
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: Savor the Central Coast
Name of Source

Was ticket distribution made at the behest of agency official? No Yes If yes: N/A
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
Legislative Office	Two (2)	Economic development/promotional activities on behalf of City.
City Management Office	Two (2)	Economic development/promotional activities on behalf of City.
Parks & Recreation Department	Two (2)	Economic development/promotional activities on behalf of City.

B. Name of Individual <small>(Last, First)</small>	Number of Ticket(s)/Pass(es)	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 <small>(Include address and description)</small>	Number of Ticket(s)/Pass(es)	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.

	Robert Perrault	City Manager	11/20/2014
Signature of Agency Head or Designee	Print Name	Title	(Month, Day, Year)