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

1. Agency Name
City of Rancho Cordova
Division, Department, or Region (If applicable)

Designated Agency Contact (Name, Title)
Stacy Leitner, City Clerk

Area Code/Phone Number E-mail
916-851-8720 sleitner@cityofranchocordova.org

Date Stamp
California Form 802
For Official Use Only

Amendment (Must Provide Explanation In Part 3.)

Date of Original Filing: (Month, Day, Year)

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐

Event Description: Sac. Metro Chamber Business Award

Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐

Face Value of Each Ticket/Pass $ 225

Date(s) 02 / 01 / 19 02 / 01 / 19

Was ticket distribution made at the behest of agency official? Yes ☐ No ☒

Name of Source

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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/ Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
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</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/ Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>McGarvey, Robert J.</td>
<td>2 V:6</td>
<td>Ceremonial Role ☐ Other ☒ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
</tbody>
</table>

| Gatewood, Garrett                    | 2 V:6                       | Ceremonial Role ☐ Other ☒ Income ☐ |
|                                     |                            | If checking "Ceremonial Role" or "Other" describe below: |

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/ Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
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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.

Signature of Agency Head or Designee
Stacy Leitner
Print Name
City Clerk
Title

Date (Month, Day, Year)

Comment: