С	eremonial Role Even	ts and Ticket/F	Pass Dist	ributions	A	Public Document
1.	Agency Name	··· ··			Date Stamp	California 802
	City of Glendale, California					,
	Division, Department, or Reg	ion (if applicable)				For Official Use Only
	Management Services					
	Designated Agency Contact	(Name, Title)			1	
	Scott Ochoa, City Manager					
	Area Code/Phone Number	É-mail				Provide Explanation in Part 3.)
	818-548-4844	Sochoa@glendale	ca.gov		Date of Original Filing:	(month, day, year)
2.	Function or Event Infor	mation		* *** ** *	2	
	Does the agency have a tic	ket policy? Yes i	No 🗌	Face Value of	Each Ticket/Pass \$ 40).00
	Event Description: Glendale			Date(s) 05		
	Event Description:	Provide Title/ Expla	nation	Date(s)	<u></u>	
	Ticket(s)/Pass(es) provided			lf no:	Name of Source	
	Was ticket distribution made	at the behest Yes	No 🛛	If yes:	Official's Name (Last, First)	
	of agency official?					
	A. Name of Agency, Depa	rtment or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made pur	suant to the agency's policy
	B. Name of Indi (Last, Fir		Number of Ticket(s)/ Passes		Identify one of the fi	ollowing:
	Gharpetian, Vartan		1	FPPC 1894	nonial Role Other X 1.1 (C)-Public Purpose visibility and/or profile	Promotion of City
	Najarian, Ara		1	FPPC 18944	nonial Role Other X (C)-Public Purpose. visibility and/or profile	Promotion of City
	C. Name of Outside O (include address and		Number of Ticket(s)/ Passes	Describe th	e public purpose made pur	suant 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. e,

The	Scott Ochoa	City Manager	June 28, 2017
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

Comment:

Ceremonial Role Even	ts and Ticket/P	ass Disti	ributions	Α	Public Document
1. Agency Name				Date Stamp	California 802
City of Glendale					
Division, Department, or Reg	ion (if applicable)			1	For Official Use Only
Management Services					
Designated Agency Contact	(Name, Title)			1	
Scott Ochoa, City Manager				K7 a	
Area Code/Phone Number	E-mail			Amendment (Must Pr	ovide Explanation in Part 3.)
818-548-4844	Sochoa@glendalec	a.gov		Date of Original Filing: _	(month, day, year)
2. Function or Event Infor	mation	953 - 5 S			
Does the agency have a ticl	ket policy? Yes		Face Value of	Each Ticket/Pass \$ 40.	00
Event Description: Glendale	Dodger Night		Date(s) 05		
Event Description.	Provide Title/ Explan	nation		//	
Ticket(s)/Pass(es) provided	by agency? Yes 5		if no:	Name of Source	
Was ticket distribution made	e at the behest Yes [No 🛛	lf yes:	Official's Name (Lest, First)	
of agency official?					
A. Name of Agency, Depa Management Services	artment or Unit	Number of Ticket(s)/ Passes 2	FPPC 18944	e public purpose made purs 1.1(C)-Public Purpose. visibility and/or profile c	Promotion of City
B. Name of Indi (Last, Fin	Contraction of the second s	Number of Ticket(s)/ Passes		Identify one of the fo	
				ionial Role 🚺 Other 🔲 ing "Ceremoniel Role" or "Other" deec	Income
				ioniai Role Cother Cother desc	lincome
C. Name of Outside O (include address and		Number of Ticket(s)/ Passes	Describe the	e public purpose made purs	uant 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.

A stand	Scott Ochoa	City Manager	June 28, 2017
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

Comment: _

1.	Agency Name				Date Stamp	California 802
	City of Glendale, California	land of the second second				For Official Use Only
	Division, Department, or Reg	ion (if applicable)				i di dinan dad ding
	Management Services Designated Agency Contact	Alomo Tillol				
	Scott Ochoa, City Manager	wanne, 1100)				
	Area Code/Phone Number	E-mail	1944 - Andrea Martin Andre A		Amendment (Must Pr	ovide Explanation in Part 3.)
					Date of Original Filing:	
0100000	818-548-4844	Sochoa@glendale	ca.gov		Date of engina Fining. 2	(month, day, year)
2.	Function or Event Infor	mation				
	Does the agency have a tick	ket policy? Yes	No 🗖	Face Value of	Each Ticket/Pass \$ 40.	.00
	Event Description: Glendale	Dodger Night Provide Title/ Expla		Date(s) 05	<u>, 24 , 17</u> .	//
	Tieket/a)/Dena/aa) provided	5		If no:		
	Ticket(s)/Pass(es) provided	by agency r res	🛛 No 🗖	II NO	Name of Source	
	Was ticket distribution made	at the behest Yes	No 🛛	If yes:	Official's Name (Last, First)	and the second secon
	of agency official?	- 1000EBA2939			Umciai's Name (Last, Hirst)	
	A. Name of Agency, Depa	vidual	Number of Ticket(s)/ Passes Number of Ticket(s)/		e public purpose made purs	
	(Last, Fin Kassakhian, Ardy	st)	Passes 1	FPPC 18942	nonial Role D Other X M (C)-Public Puppose. visibility and/or profile o	Promotion of City
				10 TV98 2006 20 TV97	nonial Role Other X dng "Caremonial Role" or "Other" desc	Income
	C. Name of Outside Or (include address and		Number of Ticket(s)/ Passes	Describe th	e public purpose made purs	uant 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.

the	Scott Ochoa	City Manager	June 28, 2017
Elghelure of Agency Head or Designee	Print Name	Title	(month, day, year)

Comment: _

A Public Document

С	eremonial Role Even	ts and Ticket/P	ass Distr	ibutions	A	Public Document
1.	Agency Name				Date Stamp	California 802
	City of Glendale, California					April 1
	Division, Department, or Reg	ion (if applicable)			1	For Official Use Only
	Management Services					
	Designated Agency Contact	(Name, Title)				
	Scott Ochoa, City Manager					ovide Explanation in Part 3.)
	Area Code/Phone Number	E-mail				,
	818-548-4844	Sochoa@glendaled	ca.gov		Date of Original Filing: _	(month, day, year)
2.	Function or Event Infor	mation				
	Does the agency have a tick	ket policy? Yes	No 🗆 🖡	Face Value of	Each Ticket/Pass \$ 40.	00
k.,	Event Description: Glendale	Dodger Night		Date(s)		/
	Ticket(s)/Pass(es) provided			f no:	Name of Source	
	Was ticket distribution made of agency official?	e at the behest Yes		f yes:	Official's Name (Last, First)	
3.	Recipients • Use Section A to identify the agen	er's department or unit	The Section B to	identify an Individ	ual. • Use Section C to identif	y an outside organization.
	No Marco Contra		Number	1		
	A. Name of Agency, Dep	artment or Unit	of Ticket(s)/ Passes	Describe th	e public purpose made purs	uant to the agency's policy
	B. Name of Indi (Last, Fir		Number of Ticket(s)/ Passes		Identify one of the fo	lowing:
	Manoukian, Rafi		1	FPPC 18944	onial Role Conter 2 	
					onial Role D Other D Ing "Ceremonial Role" or "Other" desc	Income 🗌
	C. Name of Outside O (Include address and		Number of Ticket(s)/ Passes	Describe the	a public purpose made pursu	uant to the agency's policy
	~					
4.	Verification					
	I have read and understand FF with the requirements.	PC Regulations 18944	.1 and 18942.	l have verified t	hat the distribution set for	th above, is in accordance
	XHI /	Sco	tt Ochoa		City Manager	June 28, 2017
	Signature of Agency Head or Design		nnt Name		Title	(month, day, year)

Comment: _

A Public Document

-					1	
1.	Agency Name				Date Stamp	California 802
	City of Glendale					For Official Use Only
	Division, Department, or Reg	ion (if applicable)				r or onlose cas only
	Management Services					
	Designated Agency Contact	(Name, Title)				
	Scott Ochoa, City Manager	**			Amendment (Must	Provide Explanation in Part 3.)
	Area Code/Phone Number	E-mail				422 E)
-	818-548-4844	Sochoa@glendale	eca.gov		Date of Original Filing	:(month, day, year)
2.	Function or Event Infor	mation		50 GB		1
	Does the agency have a ticl	ket policy? Yes		Face Value of	Each Ticket/Pass \$ 4	0.00
	Event Description: Glendale	Dodger Night Provide Title/ Exp		Date(s)		
	Ticket(s)/Pass(es) provided			lf.no:		
	nonodowi dooloo) provided	by againay . 183			Name of Source	· · · · · · · · · · · · · · · · · · ·
	Was ticket distribution made	at the behest Yes		lf yes:	Official's Name (Lest, First	1
	of agency official?				Unitial's Name (Last, Filst,	1
3.	Recipients				a a na tanàna na amin'ny kaodim-paositra dia dia dia dia dia dia dia dia dia di	
	• Use Section A to identify the agen	cy's department or unit.	• Use Section B to	identify an individ	ual. • Use Section C to iden	ntify an outside organization.
	A. Name of Agency, Depa	rtment or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made pu	insuant to the agency's policy
	City Attorney Department		1		1.1(C)-Public Purpose visibility and/or profile	
	B. Name of Indi (Last, Fin		Number of Ticket(s)/		identify one of the	following:
		xy	Passes			7
			2		ionial Role 🚺 Other [ding "Ceremoniel Role" or "Other" d	
		4. L		1	oonial Role D Other [ing "Ceremonial Role" or "Other" d	
	C. Name of Outside Or (include address and		Number of Ticket(s)/ Passes	Describe the	a public purpose made pu	rsuant to the agency's policy
		, <u>, , , , , , , , , , , , , , , , , , </u>			3 4	
	Verification I have read and understand FP with the requirements.	PC Regulations 1894	4.1 and 18942.	I have verified t	hat the distribution set i	forth above, is in accordance
	TANK	So	ott Ochoa		City Manager	June 28, 2017
4	Signature of Agency Head or Design		Print Name		Title	(month, day, year)

Comment: _____

	gency Report of: eremonial Role Even	ts and Ticket/P	ass Dis	tributions	A	Public Do	cument
1.	Agency Name	· · · · · · · · · · · · · · · · · · ·			Date Stamp	California	802
	City of Glendale, California					Form	002
	Division, Department, or Reg	ion (if applicable)			1	For Official	Use Only
	Management Services						
	Designated Agency Contact	(Name, Title)			1		
	Scott Ochoa, City Manager				Amendment (Must)	Provide Explanation in	Part 21
	Area Code/Phone Number	E-mail		27		-rovide Explanation in	r an 3.)
	818-548-4844	SOchoa@Glendal	eca.gov		Date of Original Filing:	(month, day, yea	r)
2.	Function or Event Infor	mation	52 - 5369 - 16				
ii.	Does the agency have a tic	ket policy? Yes	No 🗆	Face Value of	Each Ticket/Pass \$ 4	0	
	Event Description: Glendale	e Dodger Night		Date(s)05_	<u>, 24 , 17</u>		
		Provide Title/ Expla	nation				
	Ticket(s)/Pass(es) provided	by agency? Yes	Xi No 🗆	lf no:	Name of Source		
	Was ticket distribution made	e at the behest Yes		lf yes:	Official's Name (Last, First)		

of agency official?

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.

Α.	Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
Com	munity Development Department	11	FPPC 18944.1(C) - Public Purpose. Promotion of City recognition, visibility and/or profile on a local scale.
В.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
			Ceremonial Role Other Income Income Income Income
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below.
c.	Name of Outside Organization (include address and description)	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.

AR	Scott Ochoa	City Manager	7/19/17
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

Comment:

Name Indale, California apartment, or Region (if ent Services Agency Contact (Name, ba, City Manager Phone Number 844 SOc or Event Information agency have a ticket point cription: Glendale Dody vass(es) provided by age distribution made at the official? nts n A to identify the agency's depined by age	Title) ail choa@Glendal on olicy? Yes ger Night Provide Title/ Expl gency? Yes e behest Yes	⊠ No □ F Ianation □ □ □ □ □ □ No □ □ □	Face Value of Ea Date(s) f no: f yes;	Date of Original Filing: . ach Ticket/Pass \$ 40	(month, day, year)
epartment, or Region (if ent Services Agency Contact (Name, ba, City Manager Phone Number 844 SOc or Event Information agency have a ticket po cription: <u>Glendale Dode</u> Pass(es) provided by age distribution made at the official?	Title) ail choa@Glendal on olicy? Yes ger Night Provide Title/ Expl gency? Yes e behest Yes	⊠ No □ F Ianation □ □ □ □ □ □ No □ □ □	Face Value of Ea Date(s) f no: f yes;	Date of Original Filing: . ach Ticket/Pass \$ 40 24 / 17 Name of Source	For Official Use Only Provide Explanation in Part 3) (month, day, year)
Agency Contact (Name, ba, City Manager Phone Number 844 Cor Event Information agency have a ticket por cription: Glendale Dody Pass(es) provided by age distribution made at the cofficial?	Title) ail choa@Glendal on olicy? Yes ger Night Provide Title/ Expl gency? Yes e behest Yes	⊠ No □ F Ianation □ □ □ □ □ □ No □ □ □	Face Value of Ea Date(s) f no: f yes;	Date of Original Filing: . ach Ticket/Pass \$ 40 24 / 17 Name of Source	(month, day, year)
Agency Contact (Name, ba, City Manager Phone Number E-ma 844 SOc or Event Information agency have a ticket po cription: Glendale Dodg Pass(es) provided by age distribution made at the official?	ail choa@Glendal on olicy? Yes <u>ger Night</u> <i>Provide Title/ Explo gency?</i> Yes e behest Yes	⊠ No □ F Ianation □ □ □ □ □ □ No □ □ □	Face Value of Ea Date(s) f no: f yes;	Date of Original Filing: . ach Ticket/Pass \$ 40 24 / 17 Name of Source	(month, day, year)
ba, City Manager Phone Number 844 SOC or Event Information agency have a ticket por cription: Glendale Dode Pass(es) provided by age distribution made at the official? nts	ail choa@Glendal on olicy? Yes <u>ger Night</u> <i>Provide Title/ Explo gency?</i> Yes e behest Yes	⊠ No □ F Ianation □ □ □ □ □ □ No □ □ □	Face Value of Ea Date(s) f no: f yes;	Date of Original Filing: . ach Ticket/Pass \$ 40 24 / 17 Name of Source	(month, day, year)
Phone Number E-ma 844 SOc or Event Information agency have a ticket poly cription: Glendale Dody ass(es) provided by age distribution made at the official?	choa@Glendal on blicy? Yes <u>ger Night</u> <i>Provide Title/ Expl</i> gency? Yes e behest Yes	⊠ No □ F Ianation □ □ □ □ □ □ No □ □ □	Face Value of Ea Date(s) f no: f yes;	Date of Original Filing: . ach Ticket/Pass \$ 40 24 / 17 Name of Source	(month, day, year)
844 SOC or Event Information agency have a ticket poly cription: <u>Glendale Dody</u> pass(es) provided by age distribution made at the official?	choa@Glendal on blicy? Yes <u>ger Night</u> <i>Provide Title/ Expl</i> gency? Yes e behest Yes	⊠ No □ F Ianation □ □ □ □ □ □ No □ □ □	Face Value of Ea Date(s) f no: f yes;	ach Ticket/Pass \$ 40	(month, day, year)
agency have a ticket po cription: <u>Glendale Dode</u> ass(es) provided by ag distribution made at the official?	Dicy? Yes ger Night Provide Title/ Explo gency? Yes e behest Yes	⊠ No □ F Ianation □ □ □ □ □ □ No □ □ □	Face Value of Ea Date(s) f no: f yes;	ach Ticket/Pass \$ 40	(month, day, year)
agency have a ticket po cription: <u>Glendale Dode</u> ass(es) provided by ag distribution made at the official?	olicy? Yes ger Night Provide Title/ Expl gency? Yes e behest Yes	lanation □ □ ☑ No □ I □ No ⊠ I	Date(s) <u>05</u> / f no: f yes:	24 / 17 Name of Source	//
cription: <u>Glendale Dode</u> ass(es) provided by ag distribution made at the official? nts	ger Night Provide Title/ Expli- jency? Yes e behest Yes	lanation □ □ ☑ No □ I □ No ⊠ I	Date(s) <u>05</u> / f no: f yes:	24 / 17 Name of Source	//
ass(es) provided by ag distribution made at th official? nts	Provide Title/ Explo jency? Yes e behest Yes	ianation ⊠ No □ I □ No ⊠ I	f no:	Name of Source	
ass(es) provided by ag distribution made at th official? nts	Provide Title/ Explo jency? Yes e behest Yes	ianation ⊠ No □ I □ No ⊠ I	f no:	Name of Source	
distribution made at th official? nts	e behest Yes		f yes:		
r official? nts			f yes:		
r official? nts				Official's Name (Last, First)	
nts	partment or unit.	• Use Section B to	idaasifa aa indinidaa		
	partment or unit.	• Use Section B to	l danslifer om fra diet dere		
Name of Agency, Department	or linit	Number			ify an outside organization. suant to the agency's policy
taine of Agency, Department		of Ticket(s)/ Passes	Describe the	hanic bailtose mede han	angue to the effency a hours
orks Department		12			
Name of Individual (Last, First)		Number of Ticket(s)/ Passes		identify one of the f	ollowing:
		Number of Ticket(s)/ Passes	Describe the p	public purpose made pur	suant to the agency's policy
	(Last, First) Name of Outside Organiza	Name of Individual	Vorks Department 12 Name of Individual (Last, First) Number of Ticket(s)/ Passes Name of Outside Organization (include address and description) Number of Ticket(s)/	Vorks Department 12 FPPC 18944. Name of Individual (Last, First) Number of Ticket(s)/ Passes I Name of Outside Organization (include address and description) Number of Ticket(s)/ Passes Ceremor I/ checking	/orks Department 12 FPPC 18944.1(C) - Public Purpos recognition, visibility and/or profile Name of Individual (Last, First) Number of Ticket(s)/ Passes Identify one of the f Name of Outside Organization (Last) Number of Ticket(s)/ Passes Ceremonial Role □ Other □ Name of Outside Organization (Last) Number of Ticket(s)/ Of Ticket(s)/ Describe the public purpose made purpose

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.

CONV	Scott Ochoa	City Manager	7/19/17
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)
Comment:			

C	eremonial Role Even	ts and Ticket/P	ass Distri	ibutions	/	A Public Document
1.	Agency Name				Date Stamp	California 802
	City of Glendale, California			14		Form OOZ
	Division, Department, or Regi	on (if applicable)				For Official Use Only
	Management Services	atom and with				
	Designated Agency Contact (Name, Title)				
	Scott Ochoa, City Manager			1	Amendment (Musi	Provide Explanation in Part 3.)
	Area Code/Phone Number	E-mail				• **
	818-548-4844 SOchoa@Glendaleca.gov				Date of Original Filing	(month, day, year)
2.	Function or Event Inform	mation				
	Does the agency have a tick	tet policy? Yes [No DF	ace Value of	Each Ticket/Pass \$	40
	Event Description: Glendale	Dodger Night		Data(a) = 05	<u>, 24 , 17</u>	1 1
	Event Description.	Provide Title/ Explai	nation		//	
	Ticket(s)/Pass(es) provided	by agency? Yes		f no:	Name of Source	
	Was ticket distribution made	at the behest Yes [f yes:	Official's Name (Last, Firs	t)
	of agency official?					
	Use Section A to identify the agen A. Name of Agency, Depa Community Services & Pa	rtment or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made p	ntify an outside organization. ursuant to the agency's policy use. Promotion of City
			7		visibility and/or profil	
	B. Name of Indi (Last, Fin		Number of Ticket(s)/ Passes		Identify one of the	a following:
	<u></u>				nonial Role Other king "Ceremonial Role" or "Other"	
					noniat Role D Other king "Ceremonial Role" or "Other"	
		C. Name of Outside Organization (include address and description)		Describe th	e public purpose made p	ursuant to the agency's policy

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.

CALL-	Scott Ochoa	City Manager	7/19/17
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)
Comment:			

	eremonial Role Even				Date Stamp	California
	Agency Name City of Glendale, California				Date Stamp	Form 802
	Division, Department, or Region (if applicable)					For Official Use Only
	-151 H. 19 19 - 70					
	Management Services Designated Agency Contact (Name Tile)				
		(vanie, nice)				
	Scott Ochoa, City Manager Area Code/Phone Number	E-mail			Amendment (Must	Provide Explanation in Part 3.)
	n ang area to the second and a se				Date of Original Filing:	
	818-548-4844 SOchoa@Glendaleca.gov			Date of Original Filling.	(month, day, year)	
2.	Function or Event Inform	nation				
	Does the agency have a tick	tet policy? Yes		ace Value of	Each Ticket/Pass \$ _	0
	Event Description: Glendale	Dodger Night	r	Data(c) 05	<u>, 24 , 17</u>	
	Event Description.	Provide Title/ Expla	anation			/
				Name of Source		
	Was ticket distribution made	at the benest Yes		r yes:	Official's Name (Last, First)	
	of agency official?					
	A. Name of Agency, Depa Glendale Water & Power	rtment or Unit	Number of Ticket(s)/ Passes 5	FPPC 18944		rsuant to the agency's policy se. Promotion of City e on a local scale.
	B. Name of Indi (Last, Fin		Number of Ticket(s)/ Passes	Cerem	Identify one of the	
				Сегеп	ing "Ceremonial Role" or "Other" d	
	C. Name of Outside Outside Outside Outside address and		Number of Ticket(s)/ Passes	Describe th	e public purpose made pu	rsuant to the agency's policy

I have read and upderstand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

(DW)	Scott Ochoa	City Manager	7/19/17
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

Comment: _____

C	eremonial Role Event	s and Ticket	Pass Distri	butions	A	Public Document
1.	Agency Name			51 - 25	Date Stamp	California 802
	City of Glendale, California					Form OUZ
	Division, Department, or Regi	on (if applicable)				For Onical Use Only
	Management Services					
	Designated Agency Contact (/	Varne, Title)				
	Scott Ochoa, City Manager				Amendment (Must P	Provide Explanation in Part 3.)
	Area Code/Phone Number	E-mail				
	818-548-4844	SOchoa@Glend	aleca.gov		Date of Original Filing:	(month, day, year)
2.	Function or Event Inform	nation				
	Does the agency have a tick	et policy? Ye	es 🖾 No 🗖 🖡	ace Value of	Each Ticket/Pass \$ 4	J
	Event Description: Glendale	Dodger Night Provide Title/ Ex	planation	Date(s)	, 24 , 17	//
	Ticket(s)/Pass(es) provided I	by agency? Ye	es 🖾 No 🗔 🛛	f no:	Name of Source	~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~
	Was ticket distribution made of agency official?	at the behest γ_{e}	es 🔲 No 🖾 🦷	r yes:	Official's Name (Last, First)	
3.	Recipients					
	• Use Section A to identify the agend	cy's department or unit	• Use Section B to	identify an individ	ual. • Use Section C to iden	tify an outside organization.
	A. Name of Agency, Depa	rtment or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made pur	suant to the agency's policy
	Finance Department		1		I.1(C) - Public Purpos visibility and/or profile	
	B. Name of India (Last, Firs		Number of Ticket(s)/ Passes		Identify one of the I	ollowing:
	<u></u>			1000-002000-00	nonial Role D Other C	
	- <u> </u>		int in the	6.5 (m. 6.5)	nonial Role Den Other de	
	C. Name of Outside Or (include address and		Number of Ticket(s)/ Passes	Describe th	e public purpose made pur	suant to the agency's policy

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.

AN	Scott Ochoa	City Manager	7/19/17
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

Comment: _____

	gency Report of: eremonial Role Even	ts and Tic	ket/Pass	Dist	tributions	AI	Public Document
1.	Agency Name City of Glendale, California Division, Department, or Reg	lon (if applicable)			Date Stamp	California Form 802 For Official Use Only
	Management Services Designated Agency Contact	(Name, Title)					
	Scott Ochoa, City Manager Area Code/Phone Number 818-548-4844	E-mail SOchoa@G	ilendaleca.go	ov.		Date of Original Filing:	vide Explanation in Part 3) (month, day, year)
2.	Function or Event Infor Does the agency have a tic Event Description: Glendale Ticket(s)/Pass(es) provided	ket policy? e Dodger Nigh Provide T	Yes 🛛 No It itle/Explanation Yes 🖾 No		Face Value of Date(s)	Each Ticket/Pass \$ 40	

Was ticket distribution made at the behest	Yes 🗌	No 🗵
of agency official?		

3. Recipients

Α.	Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
ISD		4	FPPC 18944.1(C) - Public Purpose. Promotion of City recognition, visibility and/or profile on a local scale.
B.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	identify one of the following:
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
Ð.			Ceremonial Role Other I Income I Income I Income I
C.	Name of Outside Organization (include address and description)	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.

AU	Scott Ochoa	City Manager	1/19/17
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

Comment:

A Public Document

10 10121					
Agency Name		Date Stamp	California 802		
City of Glendale, California					
Division, Department, or Regi	ion (if applicable)		For Official Use Only		
Management Services					
Designated Agency Contact (Name, Title)	1			
Scott Ochoa, City Manager		Amendment (Must Pr	h		
Area Code/Phone Number	E-mail			onde asplandion in r are o.y	
818-548-4844	SOchoa@Glendaleca.gov			Date of Original Filing: (month, day, year)	
Function or Event Inform	nation				
Does the agency have a tick	et policy? Yes [Face Value of	Each Ticket/Pass \$ $\frac{40}{2}$	
Event Description: Glendale Dodger Night Date(s) 05				<u>, 24 , 17</u>	//
Ticket(s)/Pass(es) provided	63 63		lf no:	4.01	
ar r r					
Was ticket distribution made of agency official?	at the behest Yes [if yes:	Official's Name (Last, First)	<u> </u>
Recipients • Use Section A to identify the agen	cy's department or unit. •	Use Section B to	identify an individ	ual. • Use Section C to identi	fy an outside organization.
A. Name of Agency, Depa	rtment or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made pura	uant to the agency's policy
Library Department	1	FPPC 18944.1(C) - Public Purpose. Promotion of City recognition, visibility and/or profile on a local scale.			
		Number of Ticket(s)/ Passes		Identify one of the fo	llowing:
			aberranalistoreese	strategies and state	
					Construction of the second sec
		Number of Ticket(s)/ Passes	Describe the	e public purpose made purs	uant to the agency's policy
	City of Glendale, California Division, Department, or Regi Management Services Designated Agency Contact (Scott Ochoa, City Manager Area Code/Phone Number 818-548-4844 Function or Event Inform Does the agency have a tick Event Description: Glendale Ticket(s)/Pass(es) provided Was ticket distribution made of agency official? Recipients • Use Section A to identify the agen A. Name of Agency, Depa Library Department B. Name of Indife (Last, First	City of Glendale, California Division, Department, or Region (if applicable) Management Services Designated Agency Contact (Name, Title) Scott Ochoa, City Manager Area Code/Phone Number 818-548-4844 SOchoa@Glendale Function or Event Information Does the agency have a ticket policy? Yes [Event Description: Glendale Dodger Night Provide Title/Expla Ticket(s)/Pass(es) provided by agency? Yes [of agency official? Recipients • Use Section A to identify the agency's department or unit. A. Name of Agency, Department or Unit Library Department B. Name of Individual (Last, First)	City of Glendale, California Division, Department, or Region (if applicable) Management Services Designated Agency Contact (Name, Title) Scott Ochoa, City Manager Area Code/Phone Number 818-548-4844 SOchoa@Glendaleca.gov Function or Event Information Does the agency have a ticket policy? Yes X No I Event Description: Glendale Dodger Night Provide Title/Explanation Ticket(s)/Pass(es) provided by agency? Yes X Vas ticket distribution made at the behest Yes No X of agency official? Recipients •Use Section A to identify the agency's department or unit. •Use Section B to A. Name of Agency, Department or Unit O Ticket(s)/ Passes Library Department 1 B. Name of Individual (Last, First) Number of Ticket(s)/ Passes	City of Glendale, California Division, Department, or Region (If applicable) Management Services Designated Agency Contact (Name, Title) Scott Ochoa, City Manager Area Code/Phone Number 818-548-4844 SOchoa@Glendaleca.gov Function or Event Information Does the agency have a ticket policy? Yes 🛛 No 🗌 Face Value of Event Description: Glendale Dodger Night Date(s) _05 Provide Title/Explanation Ticket(s)/Pass(es) provided by agency? Yes 🖾 No 🗌 If no: Was ticket distribution made at the behest Yes 🗌 No 🖾 If yes: of agency official? Number * Use Section A to identify the agency's department or unit. * Use Section B to identify an Individ Number A. Name of Agency, Department or Unit of Ticket(sy/ Passes) Describe th Library Department 1 FPPC 18944 recognition, B. Name of Individual (Last, First) Number of Ticket(sy/ Passes) Cerem if check Cerem Cerem Cerem If check Describe th	City of Glendale, California Division, Department, or Region (If applicable) Management Services Designated Agency Contact (Name, Title) Scott Ochoa, City Manager Area Code/Phone Number E-mall 818-548-4844 SOchoa@Glendaleca.gov Date of Original Filling: - Function or Event Information Does the agency have a ticket policy? Yes X No Fraction or Event Information Does the agency have a ticket policy? Yes X No Fraction or Event Information Does the agency have a ticket policy? Yes X No Fracted Value of Each Ticket/Pass \$ 40 Event Description: Glendale Dodger Night Provide Title/Explanation Date(s) Ticket(s)/Pass(es) provided by agency? Yes X No Vas ticket distribution made at the behest Yes No X If yes:

4. Verification

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.

QUL	Scott Ochoa	City Manager	7/19/17
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

Comment: ____