

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

**A Public Document**

<b>1. Agency Name</b> City of Redlands Division, Department, or Region (If Applicable)		Date Stamp <b>FILED</b>  FEB 01 2016	<b>California Form 802</b> For Official Use Only
Designated Agency Contact (Name, Title) Sam Irwin, City Clerk		<b>Redlands City Clerk</b>	
Area Code/Phone Number (909) 798-7531	E-mail sirwin@cityofredlands.org	<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: <u>2/1/16</u> <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 \$ 249.00

Event Description Esri Geodesign Summit    Date(s) 1 / 27 / 16    1 / 28 / 16  
Provide Title/Explanation

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

Was ticket distribution made at the behest of agency official?    No     Yes     If yes: Irwin, Sam  
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
Innovation & Technology Department	2	Educational, triple bottom line urban and regional planning for resiliency
Development Services Department	4	Educational, triple bottom line urban and regional planning for resiliency
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 (include address and description)	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.*

<small>Signature of Agency Head or Designee</small>	Sam Irwin <small>Print Name</small>	City Clerk <small>Title</small>	2/1/16 <small>(Month, Day, Year)</small>
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