

**Tickets Provided by Agency Report**

**A Public Document**

TICKETS PROVIDED BY AGENCY REPORT

<b>1. Agency Name</b> City of La Palma		Date Stamp	<b>California Form 802</b> For Official Use Only
Division, Department, or Region (if applicable)			
Street Address 7822 Walker Street			
Area Code/Phone Number 714-690-3300	E-mail lauriem@cityoflapalma.org	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: <u>01/31/11</u> (month, day, year)	
Agency Contact (name and title) Laurie A. Murray, Administrative Services Manager/City Clerk			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 02 / 20 / 10 Description of Event: 2010 Cypress College Foundation Americana Awards  
 \_\_\_\_\_ Face Value of Ticket: \$ 225

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Cypress College Foundation  
 Number of Tickets Received: 2 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)


Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Steve Shanahan	2	Promotes City Recognition; City-sponsored community service organizations; volunteer activities; provides oppty to confer with other government officials

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: \_\_\_\_\_  
 Name of Individual or Organization: \_\_\_\_\_ Number of Tickets: \_\_\_\_\_  
 Description of Organization: \_\_\_\_\_  
 Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code  
 Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
 \_\_\_\_\_

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

	Dominic Lazzaretto	City Manager	01/31/11
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)  
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