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

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i.	Agency Name				Date Stamp	California 802		
	City of Calabasas]	Form OUZ				
	Division, Department, or Reg	ion (if applicable)		For Official Use Only				
	Designated Agency Contact	(Name Title)			-			
		(114,110,110)						
	Area Code/Phone Number	Maricela Hernandez Area Code/Phone Number E-mail				Amendment (Must Provide Explanation in Part 3.)		
					Date of Original Filing			
	818-224-1661	mhernandez@cityofo	carabasas.com		Date of Original Filling	: (month, day, year)		
2.	Function or Event Infor	mation			,	75.00		
	Does the agency have a ticket policy? Yes $\ \ \ \ \ \ \ \ \ \ \ \ \ $				Each Ticket/Pass \$ 2	73.00		
					/25 / 2020	09 , 25 , 2020		
		Provide Title/ Explanation						
	Ticket(s)/Pass(es) provided	by agency? Yes	Name of Source					
	Mag tight distribution made	at the beheat		yes:				
	Was ticket distribution made of agency official?	e at the benest Yes	☑ No ☐ "	yes	Official's Name (Last, First	t)		
	or 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.						
	A. Name of Agency, Depa	artment or Unit	Number of Ticket(s)/	Describe th	he public purpose made pursuant to the agency's policy			
	A. Name of Agency, 2000	artinonic or onic	Passes	20001120 (11	io publio purpoco mado p	arouant to the agency c pency		
	B. Name of Ind	Number of Ticket(s)/		Identify one of the following:				
	(Last, Fir	Sij	Passes	_				
					nonial Role 🔽 Other king "Ceremonial Role" or "Other"			
	David J. Shapiro		1		•			
					·			
					nonial Role Other Other William Other O			
	James R. Bozajian		1					
	Name of Outside O		Number					
	C. Name of Outside O (include address and		of Ticket(s)/ Passes	Describe th	ne public purpose made p	ursuant to the agency's policy		
			1					
_	Verification							
۲.	I have read and understand FF with the requirements.	PPC Regulations 1894	4.1 and 18942.	I have verified	that the distribution set	forth above, is in accordance		
	Moicela Hernands	Maricela Herr	nandez	City (Clerk	10/29/2020		
	Signature of Agency Head or Design		Print Name		Title	(month, day, year)		
	•					·		
	Comment:							

FAIR POLITICAL PRACTICES COMMISSION FORM 802 - TICKETS/PASSES CALABASAS FILM FESTIVAL SEPTEMBER 25, 2020

Name	Department	Cost	# of Tickets	Purpose
Maricela Hernandez	City Clerk	\$20.00	1	Section 4 (b), (h), (I), (n)