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

| Δ | Ρı | ıh | lic | Do | CI | ım | er | ١t |
|---|----|----|-----|----|----|----|----|----|
| | | | | | | | | |

| rickerAdmission distribution | פווכ | | | | ublic bocumen | | |
|---|-------------------------------------|----------------------------|--|--|-------------------------------|--|--|
| I. Agency Name | Date Stamp | California 802 | | | | | |
| City of Santa Barbara | | | | | | | |
| Division, Department, or Region (if ap | 1 | For Official Use Only | | | | | |
| Active Adults & Classes / Parks and | d Recreation Depart | | | | | | |
| Street Address | | 100 | 1 - 1 | | | | |
| 100 E. Carrillo St., Santa Barbara, | CA 93101 | | | | | | |
| Designated Agency Contact (Name, Tit | Amendment (Must provid | de evalenation in Part 3) | | | | | |
| Jason Bryan, Senior Recreation Su | pervisor | | | | | | |
| Area Code/Phone Number E-mail | HALLING T | 1411 | | Date of Original Filing: | (month, day, year) | | |
| 805-897-2519 jbryan | @santabarbaraca | a.gov | | 4 34-34 | UE * voi/l=0= * | | |
| . Function, Event, or Ceremonia | I Role Informat | tion | | 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - | | | |
| 1.4.0 (2006) = 1.0.0 | | | | | 25 | | |
| Title Santa Barbara Symphony Tick | cets | | Face \ | Value of Each Admissio | n \$ _ 25 | | |
| Description Appreciation for low-in non-profit organization | | n a | Date(s | 3) 1 , 22 , 12 | | | |
| Ticket(s)/Admission(s) provided I | oy agency? Yes | □ No ☑ | If no: Amy | Bassett, Symphony Director of Name of Soci | of Education and Outreac | | |
| | | | | | | | |
| Was the distribution to persons in | dentified below n | nade at th | e behest of | f an agency official? | | | |
| Pa ₂ | on Japan Sanjar D | coroction Su | mandaar | | | | |
| Yes 🖸 No 🔲 If yes: 🗗 | an, Jason - Senior Ro Official's | | | | | | |
| | | | . noty and Thio | | | | |
| The identity of recipient(s) and | the explanation | on: | | | | | |
| Name (Last, First) | | William C | A CLUMENT RECOVERED BY THE PARTY OF THE PART | e income box if the agency officience. If the agency official perf | | | |
| or or | Number of Admission(s)/ | Agency Officiai | also prov | vide a description. | | | |
| Organization (Name, Address, Description) | Ticket(s) | and a | | ome, describe the public purpose ial roles, performed by an agency | | | |
| | | at the second | organiza | | | | |
| Prowell, Dave | 2 | Yes 🗖 | by non-profit organ | ring appreciation for programs or services rend izations which programs or services have bene | efited Santa Barbara | | |
| | | No 🖸 | residents. | | lered to the community Income | | |
| Oviatt, Paula | 1 | Yes 🗖 | by non-profit organ | Supporting or showing appreciation for programs or services rendered to the community by non-profit organizations which programs or services have benefited Santa Barbara | | | |
| | ' | No 🗸 | residents. | | <u> </u> | | |
| Gordon, Elaine | 1 | Yes | by non-profit organ | ting or showing appreciation for programs or services rendered to the community InCo profit organizations which programs or services have benefited Santa Barbara | | | |
| | <u> </u> | No 🖸 | residents. | | -grange - L | | |
| | | Yes | | | income | | |
| | | No 🗆 | | | | | |
| | | Yes | | | Income | | |
| | 9 | No 🗆 | | | | | |
| Verification | | | | | | | |
| I have read and understand FPPC Regular in accordance with the provisions | ulations 18944.1 and | d 18942. I h | ave verified t | that the distribution of admis | sions, set forth above, | | |
| is in accordance with the provisions. | | | | | 1 1 | | |
| Mulustice | Nancy Rapp | | Direc | tor, Parks and Recreatio | n 1/25/12 | | |
| Signature of Agency Head or Designee | | Print Name | | Title | (month, day, year) | | |
| () () | | | | | | | |
| Comment. (Use this space or an attachme | ent for any additional ii | nformation in | cluding amend | ment explanation.) | | | |