

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

A Public Document

1. Agency Name City of Lemon Grove		Date Stamp	California Form 802
Division, Department, or Region (if applicable) City Managers Department		RECEIVED JAN 2 2022	For Official Use Only
Designated Agency Contact (Name, Title) Lydia Romero, City Manager			<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3)
Area Code/Phone Number 619-825-3800	E-mail lromero@lemongrove.ca.gov	Date of Original Filing: _____ (month, day, year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 50.00

Event Description: YBNB Manuscript Release Party Date(s) 02 / 26 / 22
Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: Young Black N' Business
Name of Source

Was ticket distribution made at the behest of agency official? Yes No If yes: _____
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)/ Passes	Describe the public purpose made pursuant to the agency's policy
City of Lemon Grove Office of the Mayor	2	Performance of a ceremonial role or function representing the City at the event (Applicable City Policy 5.3, [a])
B. Name of Individual (Last, First)		
	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</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.

 _____ Lydia Romero City Manager 01/25/2022
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: _____