

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

A Public Document

1. Agency Name		Date Stamp RECEIVED CITY OF SALINAS JUL 30 2024 CITY CLERK	California Form 802
City of Salinas			For Official Use Only
Division, Department, or Region (if applicable)			
Administration			
Designated Agency Contact (Name, Title)			
Patricia M. Barajas			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.)	
(831) 758-7383	cclerk@ci.salinas.ca.us	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 \$ \$28 ticket; \$30 meal

Event Description: California Rodeo Salinas 2024 Date(s) 07/18/2024 07/21/2024
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: California Rodeo Association
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
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Barrera, Tony	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Promotion of event and activities supported by the City
Valenzuela, Jesus	4	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Promotion of event and activities supported by the City
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.

	Patricia M. Barajas	City Clerk	7/30/2024
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

Pursuant to City of Salinas Ticket Distribution Policy Sec. III(o);
 Comment: Meal \$30.00; Box Seat Ticket \$28.00; Parking \$20 - reported on separate Form 802

**Agency Report of:
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Continuation Sheet**

Agency Name
City of Salinas

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
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Jacobs, David	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i> Promotion of event and activities supported by the City
Klemek, Sam	4	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i> Promotion of event and activities supported by the City
Sandoval, Andrew	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i> Promotion of event and activities supported by the City
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

Print **Clear**