

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions **RECEIVED** **A Public Document**

1. Agency Name		Date Stamp	California Form 802
City of Manhattan Beach		2022 AUG 22 PM 12:37 CITY CLERK'S OFFICE MANHATTAN BEACH, CA	For Official Use Only
Division, Department, or Region (if applicable)			
Management Services		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.)	
Designated Agency Contact (Name, Title)			
Liza Tamura, City Clerk		Date of Original Filing: _____ (month, day, year)	
Area Code/Phone Number	E-mail		
310-802-5063	ltamura@manhattanbeach.gov		

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ _____ 30.00

Event Description: Lifeguard Medal of Valor Date(s) 8 / 3 / 22
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: _____
Name of Source

Was ticket distribution made at the behest of agency official? Yes No If yes: _____
Official's Name (Last, First)

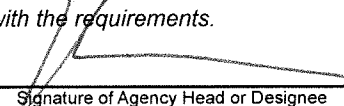
3. Recipients

• 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 Manhattan Beach: Magement Services; Parks & Recreation	4	Encouraging or rewarding significant academic, athletic, or public service achievements by MB students, <input checked="" type="checkbox"/>
B. Name of Individual (Last, First)		
		Identify one of the following:
Napolitano, Steve; Montgomery, Richard;	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>
		Encouraging or rewarding significant academic, athletic, <input checked="" type="checkbox"/>
Franklin, Joe; and Lilligren, Tim		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (include address and description)		
		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.


BRUCE MOE
CITY MANAGER
8/22/22
Signature of Agency Head or Designee
Print Name
Title
(month, day, year)

Comment: _____