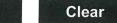
Agency Report of: In I and Tickot/Da ee Dietributione 4

С	eremonial Role Even	ts and Ticket/F	Pass Distr	ibutions	Α	Public Document
1.	Agency Name				Date Stamp	California 802
	City of Manhattan Beach					
	Division, Department, or Region (if applicable)					For Official Use Only
	Management Services Designated Agency Contact (Name, Title)					
		Name, Title)				
	Liza Tamura, City Clerk Area Code/Phone Number E-mail				Amendment (Must Pr	ovide Explanation in Part 3.)
					Date of Original Filing:	
	310-802-5056	LTAMURA@MANH	TATTANBEA	CH.GOV	Date of Original Filing: _	(month, day, year)
2.	Function or Event Infor	mation			1	407.5
	Does the agency have a ticket policy? Yes 🔳 No 🔲 Face Value of B				Each Ticket/Pass \$	137.5
	Event Description: Los Angeles Kings Tickets Date(s) 12/03				8/2022	
		Provide Title/ Explai				
	Ticket(s)/Pass(es) provided by agency? Yes I No I If no: <u>Manhatt</u>				tan Beach Chamber of Name of Source	Commerce
	Was ticket distribution made at the behest Yes No D If yes: <u>Gabriel</u> ,				George	
	of agency official?				Official's Name (Last, First)	
3.	Recipients					
	 Use Section A to identify the agen 	cy's department or unit. •		dentify an individu	al. Use Section C to identify	an outside organization.
	A. Name of Agency, Depa	rtment or Unit	Number of Ticket(s)/ Passes	Describe the	e public purpose made purs	uant to the agency's policy
	City of Manhattan Beach		2	Employee a	appreciation and retenti	on
	Community Development	Department			F -	
	B. Name of India (Last, First		Number of Ticket(s)/ Passes		Identify one of the fol	llowing:
					onial Role D Other D ing "Ceremonial Role" or "Other" desc	nibe below:
					onial Role D Other D Other or "Other" desc.	Income
	C. Name of Outside Or (include address and		Number of Ticket(s)/ Passes	Describe the	e public purpose made pursu	uant to the agency's policy
	2 · · ·					1

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.

Cas	Liza Tamura	City Clerk	9/13/23
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)
Comment:	р. 	, 	



Print