

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

**A Public Document**

|  |                                |   |  |
|--|--------------------------------|---|--|
| <b>1. Agency Name</b><br>City of Long Beach  |                                | Date Stamp  | <b>California Form 802</b><br><small>For Official Use Only</small> |
| <b>Division, Department, or Region</b> (if applicable)<br>Harbor Department                      |                                |   |  |
| <b>Designated Agency Contact</b> (Name, Title)<br>4801 Airport Plaza Drive, Long Beach, CA 90815 |                                | <input type="checkbox"/> <b>Amendment</b> (Must Provide Explanation in Part 3.)<br><br><b>Date of Original Filing:</b> <u>10/28/19</u><br><small>(month, day, year)</small> |  |
| <b>Area Code/Phone Number</b><br>(562) 283-7711  | <b>E-mail</b><br>info@polb.com |   |  |

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes     No     Face Value of Each Ticket/Pass \$ 155.00

Event Description: 25th Annual Benefit Auction    Date(s) 10 / 12 / 19    10 / 12 / 19  
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency?    Yes     No     If no: Camp Fire Long Beach Council  
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  |
|---|-----------------------------|---|
| Maiko, Nyariana - Information Management                          | 1                           | Promotion of the Port of Long Beach   |
|   |                             |   |
| B. Name of Individual (Last, First)                               | Number of Ticket(s)/ Passes | Identify one of the following:  |
|   |                             | Ceremonial Role <input checked="" type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/><br><small>If checking "Ceremonial Role" or "Other" describe below:</small> |
|   |                             | Ceremonial Role <input checked="" type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/><br><small>If checking "Ceremonial Role" or "Other" describe below:</small> |
|   |                             |   |
| 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.*

|   |                           |                            |                                   |
|---|---------------------------|----------------------------|-----------------------------------|
|   | Kerry Gerot               | Director of Communications | 10/28/19                          |
| <small>Signature of Agency Head or Designee</small> | <small>Print Name</small> | <small>Title</small>       | <small>(month, day, year)</small> |

Comment: \_\_\_\_\_