

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

A Public Document

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|--|-------------------------------|--|---|
| 1. Agency Name | | Date Stamp RECEIVED NOV 14 2011 CITY CLERK'S OFFICE CITY OF WEST COVINA | California Form 802 For Official Use Only |
| City of West Covina Division, Department, or Region (if applicable) | | | |
| City Manager's Office Street Address | | | |
| 1444 West Garvey Ave. West Covina, CA 91790 Designated Agency Contact (Name, Title) | | <input type="checkbox"/> Amendment (Must provide explanation in Part 3.) | |
| Andrew G. Pasmant, City Manager Area Code/Phone Number | E-mail | Date of Original Filing: _____ (month, day, year) | |
| (626) 939-8401 | andrew.pasmant@westcovina.org | | |

2. Function, Event, or Ceremonial Role Information

Title LA Economic Development Corp. Eddy Awards Face Value of Each Admission \$ 400.00

Description Admission to Awards Dinner Date(s) 11 / 3 / 11

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

Was the distribution to persons identified below made at the behest of an agency official?

Yes No If yes: Pasmant, Andrew City Manager
 Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

| Name (Last, First) or Organization (Name, Address, Description) | Number of Admission(s)/ Ticket(s) | Agency Official | <ul style="list-style-type: none"> Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization. |
|---|---|--|--|
| Bachman, Tom | 1 | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | Represent City at awards dinner to perform Ceremonial role <input type="checkbox"/> Income <input type="checkbox"/> City was the honoree. <input type="checkbox"/> Income <input type="checkbox"/> |
| Freeland, Chris | 1 | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | Represent City at awards dinner to perform Ceremonial role. <input type="checkbox"/> Income <input type="checkbox"/> City was the honoree. <input type="checkbox"/> Income <input type="checkbox"/> |
| | | Yes <input type="checkbox"/> No <input type="checkbox"/> | Income <input type="checkbox"/> |
| | | Yes <input type="checkbox"/> No <input type="checkbox"/> | Income <input type="checkbox"/> |

3. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.


 Signature of Agency Head or Designee
 Andrew G. Pasmant
 Print Name
 City Manager
 Title
 11/10/11
 (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

Posted