Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name California City of Fowler Division, Department, or Region (If Applicable) Designated Agency Contact (Name, Title) David Elias, City Manager Amendment (Must provide explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: 559-834-3113 (Month, Day, Year) 2. Function or Event Information 10 Face Value of Each Ticket/Pass \$. Does the agency have a ticket policy? Yes ⊠ No □ Event Description Big Fresno Fair Date(s) ___10 Provide Title/Explanation If no: Big Fresno Fair - Fresno County Ticket(s)/Pass(es) provided by agency? Yes No 🛛 Name of Source Was ticket distribution made at the behest No X Yes □ If yes: _ Official's Name (Last, First) of agency official? 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. **Number of** Name of Agency, Department or Unit Describe the public purpose made pursuant to the agency's policy Ticket(s)/ Pass(es) Ticket policy item #15, 17 City of Fowler Administration, Police, 300 Fire, Public Works, Senior, Recreation Number of Name of Individual B. Identify one of the following: Ticket(s)/ (Last, First) Pass(es) Ceremonial Role Other Income Cardenas, David If checking "Ceremonial Role" or "Other" describe below. 2 Attendance at Fowler Horse Race Day Income \square Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below. Parra, Daniel 2 Attendance at Fowler Horse Race Day Number of Name of Outside Organization C. Ticket(s)/ Describe the public purpose made pursuant to the agency's policy (include address and description) Pass(es) Ticket policy item #14 Fowler Unified School District, 658 E. 100 Adams, Fowler, CA 93625 Ticket policy item #16 Second Baptist Church, 117 N. 10th St., 20 Fowler, CA 93625 Verification I have read and upderstand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements. **David Elias** 11/17/16 City Manager Print Name Title (Month, Day, Year)

Comment: _

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



gency N								
<u>.</u>	Fowler	·						
•	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)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy					
В.	Name of Individual (Last First)	Number of Ticket(s)/ Pass(es)	Identify one of the following:					
Elias,	Elias, David		Ceremonial Role					
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:					
			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:					
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:					
C.	C. Name of Outside Organization (include address and description)		Describe the public purpose made pursuant to the agency's policy					
	ard Worship Centre, 2830 E. ing, Fowler, CA 93625	50	Ticket policy item #16					
Vision CA 9	1 Church, 214 S. 2nd St., Fowler, 3625	25	Ticket policy item #16					
	a Preschool, 231 S. 6th St. er, CA 93625	50	Ticket policy item #14					
	er Boy Scouts, Fowler Girl Scouts	40	Ticket policy item #14, 17					

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



	Name								
Rec	ty of Fowler Recipients								
A.	Section A to identify the agency's department or u Name of Agency, Department or Unit	Number of Ticket(s)/	ction B to identify an individual. • Use Section C to identify an outside organization. Describe the public purpose made pursuant to the agency's policy						
		Pass(es)							
<u>В</u> .	Name of Individuat (Lost, First)	Number of Ticket(s)/ Pass(es)							
•			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:						
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:						
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:						
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:						
C. Name of Outside Organization (include address and description)		Number of Ticket(s)/ Pass(es)							
	Lucy's Catholic Church, 512 S. 5th St. vler, CA 93625	50	Ticket policy item #16						
	sia de Cristo Church, 602 E. Merced Fowler, CA 93625	25	Ticket policy item #16						
	Paul AME Church, 102 S. 9th St., vler, CA 93625	20	Ticket policy item #16						
	e of Sharon Church, 310 N. 10th St. vler, CA 93625	20	Ticket policy item #16						

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



gency Name								
City of Fowler								
Recipients • Use Section A to identify the	ecipients See 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, Dep	artment or Unit	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy					
B. Name of Ind		Number of Ticket(s)/ Pass(es)	identify one of the following:					
			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:					
			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:					
			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:					
			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:					
C. Name of Outside Organization (Include address and description) Fowler Baptist Church, 507 E. Merced St. Fowler, CA 93625		Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy					
		50	Ticket policy item #16					
Fowler Presbyterian Ch Merced St. Fowler, CA		50	Ticket policy item #16					
	.,.							

Agency Report of:

	100	19500	•					
C	eren	nonial	Role	Events	and Ti	cket/Pass	Distribution	16

A Public Document

Aganay Nama	TOTAL CONTRACTOR OF THE PARTY O						
. Agency Name	Date Stamp Recei	alifornia 802					
City of Fowler		For Official Use Only					
Division, Department, or Region (If Applicable	e)		Marie 100	LILL YNYKC			
Designated Agency Contact (Name, Title)	nated Agency Contact (Name, Title)						
Jeannie Davis, Interim City Manager/City	Clerk			A. T. A. T. C.			
Area Code/Phone Number E-mail			Date of Original Filing:(Month, Day, Year)				
(559) 834-3113 jdavis@ci.fo	wler.ca.us						
. Function or Event Information			and the second of the second	THE RESIDENCE OF THE PARTY OF T			
Does the agency have a ticket policy?	Yes⊠ No[Face Value	of Each Ticket/Pass \$30, \$	\$10 food,parking			
Event Description Fresno Grizzlies Baseba							
Provide Title/Expl	vent Description Fresno Grizzlies Baseball Date(s) —— Provide Title/Explanation						
Ticket(s)/Pass(es) provided by agency?	Yes 🛛 No [☐ If no:					
	100 64 140		Name of Source				
Was ticket distribution made at the behest of agency official?	No 🛛 Yes [☐ If yes:	Official's Name (Last, Firs				
		THE WAS INCOMES AND A PARTY OF THE PARTY OF THE PARTY OF THE PARTY.	Official's Name (Last, Firs	<i>y</i>			
Recipients							
(1994年) [1] [1] [1] [1] [1] [1] [1] [1] [1] [1]	• 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. Number of						
A. Name of Agency, Department or Unit	Ticket(s)/	Describe the put	the public purpose made pursuant to the agency's policy				
Administration, Police, Fire, Planning	Pass(es)	Tiglish policy have #45					
Recreation, Senior, Public Works, Water	90	Ticket policy item #15					
	Number			70 S 50 N 31 W 37 S 37 S 37 S			
B. Name of Individual	Number of Ticket(s)/	Identify one of the following:					
	Pass(es)	Ceremonial Role	Other	Income			
			ial Role" or "Other" describe below:	income [
	-						
		Ceremonial Role	Other Dial Role" or "Other" describe below:	Income			
		" oncoming Continue	a				
C. Name of Outside Organization	Number of Ticket(s)/	Describe the nub	lic numose made numerical to the ca	ganavia naliau			
(include address and description)	Pass(es)						
			TO A SECURITY OF THE SECURITY				
Verification	and the second s	K-ALTU PISOPEON AT MARKETURE UNIVERSE AVOID					
I have read and understand FPPC Regulations 18944.1 and	18942. I have ven	ified that the distribution set fo	orth above, is in accordance with the requ	uirements.			
Slave Halls	Jeannie Da	avis Interi	m City Manager/City Clerk	05/24/2017			
Signature of Agency Head or Designee	Print Name		Title	(Month, Day, Year)			
ν							
Comment:							