Agency Report of:

. Agency Name		Date Stamp	California
CITY OF NEWPORT BEACH			Form 802
Division, Department, or Region ((if applicable)	2017 NAY 16 AM 11: 5	0 For Official Use Only
Designated Agency Contact (Nam	e, Title)	OFFICE OF	
David A. Kiff, City Manager		THE CITY CLEDK	t Provido Exploration in Port 2)
Area Code/Phone Number E-n	nail	CITY () CLAREAMERACH	st Provide Explanation in Part 3.)
949-644-3005 lbr	own@newportbeachca.gov	Date of Original Filin	g:(month, day, year)
Function or Event Informat	ion		
Does the agency have a ticket p	oolicy? Yes 🛛 No 🗌	Face Value of Each Ticket/Pass \$	95.00
Event Description: <u>NB Film Fest</u>		Date(s) <u>4 / 27 / 17</u>	//
Ticket(s)/Pass(es) provided by a	· · ·	If no: Newport Beach Film Festival	
	_	Name of Source	
Was ticket distribution made at t of agency official?	he behest Yes No 🛛	If yes: Official's Name (Last, Fir.	st)
A. Name of Agency, Departme	Number	Didentify an individual. • Use Section C to id Describe the public purpose made p	
Library Services Department	2	Pursuant to Ticket Policy (Count of City-Sponsored Event	cil Policy F-27)/Promotion
	Number		
B. Name of Individua (Last, First)	of Ticket(s) Passes	Identify one of th	e following:
Muldoon, Kevin	2	Ceremonial Role Other If checking "Ceremonial Role" or "Other Pursuant to Ticket Policy (Count of City-Sponsored Event	describe below:
Herdman, Jeff	2	Ceremonial Role Other If checking "Ceremonial Role" or "Other" Pursuant to Ticket Policy (Counc of City-Sponsored Event	describe below:
C. Name of Outside Organia (include address and desc		Describe the public purpose made p	oursuant to the agency's policy

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. (1)

ASCUM	David A. Kiff	City Manager	5/13/17
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)
Comment:		8	



Agency Name

CITY OF NEWPORT BEACH

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
В.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Greer, Arlene		2	Ceremonial Role Other Other Income Income Ut checking "Ceremonial Role" or "Other" describe below: Pursuant to Ticket Policy (Council Policy F-27)/Promotion of City-Sponsored Event
			Ceremonial Role Other I Income Income If checking "Ceremonial Role" or "Other" describe below:
			Ceremonial Role Other I Income Income If checking "Ceremonial Role" or "Other" describe below:
	· · · · · · · · · · · · · · · · · · ·		Ceremonial Role Other I Income
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
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