Tickets	Provided	by
Agency	Report	

A Public Document

ICKETS	PROV	/IDED	BY
AGI	ENCY	REPO	RT

1. Agency Name		Pate Stamp , California OOG			
CITY OF NEWPORT BEACH		KEULIVE	Form OUZ		
Division, Department, or Region (if applicable)				For Official Use Only	
		2010 MAY 1 1 AM 9	29		
Street Address					
3300 Newport Boulevard, Newport Beach, CA 92663		OFFICE OF THE CITY CLERK			
Area Code/Phone Number E-mail	······································		THE CITY CLERK		
949-644-3005 Ibrown@newportbeachca.gov		Anendrient (Misterdelphin Part 5.)			
Agency Contact (name and title)			Date of Original Filing: —	(month, day, year)	
Dave Kiff, City Manager				(emily way, your)	
2. Event For Which Tickets Were Distribute	ed				
Date(s) of Event: 04 / 29 / 10 Desc		nt. Newport Be	ach Film Festival - Clos	sing Ceremony	
04 / 29 / 10 Face					
Face	value of Ticke	ет: \$			
Agency Event ☐ Yes ☒ No (Identify s		•			
Name of Outside Source of Ticket(s) Provided t	to Agency: Ne	ewport Beach F	ilm Festival		
Number of Tickets Received: 20 Ticket(s) Provided to Agency: ☑ Gratuitously ☐ Pursuant to Contract					
3. Agency Official(s) Receiving Ticket(s) (us	se a continuatio	on sheet for addit	ional names)	ALIAN AND A	
Name of Official	Number		ner the Distribution is Inco		
(Last, First)	of Tickets	Describ	pe the Public Purpose for t	the Distribution	
See attached list. Promotion of		City-sponsored event			
:					
4. Individual or Organization Receiving Tic	ket(s) (Provid	led at the behest	of an agency official.)		
Name of Behesting Agency Official:					
. 5 5 5					
Name of Individual or Organization:			Number	of Tickets:	
Description of Occasionations					
Description of Organization:					
Address of Organization:					
Number and Street		City		State Zip Code	
Purpose for Distribution: (Describe the public purp	pose for the dis	tribution to the or	ganization.)		
*				***************************************	
5. Verification					
I have determined that the distribution of tickets set fo	orth above is in	accordance with	the provisions of FPPC R	Regulation 18944.1.	
Dave Kiff			anager	·	
# 2 2 2 2 2 V	Print Name	Oity IVI	Title	(month, day, year)	
Comment: (Use this space or an attachment for any add	litional information	n including amendn	nent explanation.)		

CLOSING NIGHT

Ticket Recipient	Department	# of Tkts
Mike Henn	City Council	2
Keith Curry	City Council	2
Steve Rosansky	City Council	2
Ed Selich	City Council	2
Evelyn Tseng	Admin Services	2
Rich Martin	Admin Services	1
Jeremy Rodriguez	Library Services	1
Erin Steffen	Planning	2
Ashlee Kendall	Revenue	2
Seanne Carney	Admin Services	2
Julie Hutchinson	Fire	2
Total		20