Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions  
A Public Document

1. Agency Name  
City of Lancaster  
Division, Department, or Region (if applicable)  
Lancaster Choice Energy  
Designated Agency Contact (Name, Title)  
Britt Avrit, City Clerk  
Area Code/Phone Number  
661-723-6020  
E-mail  
bavrit@cityoflancasterca.org

2. Function or Event Information  
Does the agency have a ticket policy?  Yes ☒ No ☐  
Face Value of Each Ticket/Pass $15  
Event Description: Jethawks baseball games  
Date(s) 9/2/17 9/3/17  
Ticket(s)/Pass(es) provided by agency?  Yes ☐ No ☒  
If no: Name of Source  
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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| B. Name of Individual (Last, First) | Number of Ticket(s)/Passes | Identify one of the following:  
Ceremonial Role ☐ Other ☐ Income ☐  
If checking “Ceremonial Role” or “Other” describe below: |
<table>
<thead>
<tr>
<th></th>
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</tr>
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<td></td>
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<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
</table>
| Pamela Olson  
PO Box 1526, Rosamond, CA 93560  
4  
Per policy No. 100-03 (e) |
| Beverly Cox  
43751 Frieda Ct., Lancaster 93535  
4  
Per policy No. 100-03 (e) |

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.  

Signature of Agency Head or Designee:  
(Britt Avrit)  
Datestamp: 10/9/17  
Print Name  
City Clerk  
Title  
(month, day, year)

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

1. Agency Name
City of Lancaster
Lancaster Choice Energy
Britt Avrit, City Clerk
Area Code/Phone Number 661-723-6020
E-mail bavrit@cityoflancasterca.org

2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No ☐
Face Value of Each Ticket/Pass $24-$28; parking $5
Event Description: Jethawks baseball games
Provide Title/Explanation
Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐
Date(s) 9/1/17 9/13/17
If no: Name of Source
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.

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<thead>
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<th>A. Name of Agency, Department or Unit</th>
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<tbody>
<tr>
<td>Admin/HR/CC</td>
<td>7</td>
<td>Per policy No. 100-03 (a)</td>
</tr>
<tr>
<td>Development Services</td>
<td>5</td>
<td>Per policy No. 100-03 (a)</td>
</tr>
</tbody>
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<tbody>
<tr>
<td>Christian Life Assembly, 920 W. Valley Blvd., Tehachapi, CA 93560</td>
<td>18/3</td>
<td>Per Policy 100-03 (g)</td>
</tr>
</tbody>
</table>

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.

Signature of Agency Head or Designee: Britt Avrit
Print Name: City Clerk
Title: 10/9/17
(month, day, year)

Comment: 
### Agency Name
City of Lancaster

### 3. Recipients

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<tr>
<td>Finance</td>
<td>10/2</td>
<td>Per policy No. 100-03 (a)</td>
</tr>
<tr>
<td>Parks, Recreation &amp; Arts</td>
<td>45/7</td>
<td>Per policy No. 100-03 (a)</td>
</tr>
<tr>
<td>Housing</td>
<td>2/1</td>
<td>Per policy No. 100-03 (a)</td>
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Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
City of Lancaster

Division, Department, or Region (if applicable)

Designated Agency Contact (Name, Title)
Britt Avrit, City Clerk

Area Code/Phone Number  E-mail
661-723-6020  bavrit@cityoflancasterca.org

Date of Original Filing: (month, day, year)

2. Function or Event Information

Does the agency have a ticket policy?  Yes ☒ No ☐

Face Value of Each Ticket/Pass $24-$28, parking $5

Event Description: Jethawks baseball games

Date(s) 9 / 1 / 17  9 / 13 / 17

Ticket(s)/Pass(es) provided by agency?  Yes ☒ No ☐

Was ticket distribution made at the behest of agency official?  Yes ☒ No ☐

3. Recipients

- Use Section A to identify the agency's department or unit.  
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<td>Admin-CC-IT-HR</td>
<td>38/11</td>
<td>Per policy No. 100-03 (a)</td>
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<tr>
<td>Development Services</td>
<td>13/3</td>
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<tr>
<td>Bozigian, Mark</td>
<td>25</td>
<td>Per Policy No. 100-03 (h)</td>
</tr>
<tr>
<td></td>
<td></td>
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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.

Signature of Agency Head or Designee
Britt Avrit
City Clerk
Print Name
Title
10/9/2017 (month, day, year)

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

**Agency Name**
City of Lancaster

**3. Recipients**
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<td>1/1</td>
<td>Per policy No. 100-03 (a)</td>
</tr>
<tr>
<td>Parks, Recreation &amp; Arts</td>
<td>12/1</td>
<td>Per policy No. 100-03 (a)</td>
</tr>
<tr>
<td>Housing</td>
<td>6/1</td>
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FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
City of Lancaster
Division, Department, or Region (If Applicable)

Designated Agency Contact (Name, Title)
Britt Avrit, City Clerk
Area Code/Phone Number E-mail
661-723-6020 bavrit@cityoflancasterca.org

Date Stamp
California Form 802
For Official Use Only

Date of Original Filing: ___/___/___

2. Function or Event Information
Does the agency have a ticket policy? Yes ☒ No ☐
Face Value of Each Ticket/Pass $ _______ 59
Event Description LPAC Event
Provide Title/Explanation
Date(s) 9 / 23 / 17
Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐
If no: ____________________________
Name of Source
Was ticket distribution made at the behest of agency official? No ☐ Yes ☒
If yes: ____________________________
Official's Name (Last, First)

3. Recipients
- Use Section A to identify the agency’s department or unit. 
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<tbody>
<tr>
<td>Parris, R. Rex</td>
<td>4</td>
<td>Ceremonial Role ☒ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Per Policy 100-03 (h)</td>
</tr>
<tr>
<td>Malhi, Raj</td>
<td>7</td>
<td>Ceremonial Role ☒ Other ☐ Income ☐</td>
</tr>
<tr>
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<td></td>
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B. Name of Outside Organization (include address and description) | Number of Ticket(s)/Pass(es) | 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.

Signature of Agency Head or Designee: __________________________
Print Name: __________________________
Title: __________________________
Date: 10/9/17
(Month, Day, Year)

Comment: __________________________

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)