COUNTY OF SAN DIEGO
BOARD OF SUPERVISORS

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

A Public Document

2013 JAN 22 PM 3 49

Date Stamp

THOMAS J. PASTUSZKA
CLERK OF THE BOARD
OF SUPERVISORS

California Form **802**

For Official Use Only

1. Agency Name

County of San Diego

Division, Department, or Region *(If Applicable)*

Treasurer-Tax Collector

Designated Agency Contact *(Name, Title)*

Dan McAllister, San Diego County Treasurer-Tax Collector

Area Code/Phone Number	E-mail
619-531-5231	dan.mcallister@sdcounty.ca.gov

☐ **Amendment** *(Must provide explanation in Part 3.)*

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 $ 50.00

Event Description NSDCAR Installation of Chris Osteen...
Provide Title/Explanation

Date(s) 01 / 07 / 12 ___/___/___

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

If no: North San Diego County Association of Realtors
Name of Source

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

If yes: McAllister, Dan
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.

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Pass(es)	Identify one of the following:
McAllister, Dan	1	Ceremonial Role ☒ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:* Performed a ceremonial role at the presentation of recognition of outgoing Chair and Installation of new Board members
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*

C. 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	(Month, Day, Year)
Dan McAllister	Dan McAllister	Treasurer-Tax Collector	1/22/13

Comment: _____