

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

**A Public Document**

<b>1. Agency Name</b>		Date Stamp	<b>California Form 802</b>
Cucamonga Valley Water District			For Official Use Only
Division, Department, or Region (if applicable)			
Designated Agency Contact (Name, Title)		<input type="checkbox"/> <b>Amendment</b> (Must Provide Explanation in Part 3.)  Date of Original Filing: _____ <small>(month, day, year)</small>	
Cynthia Cisneros			
Area Code/Phone Number	E-mail		
909-987-2591	cindyc@cvwdwater.com		

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes  No     Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 18.00

Event Description: Quakes Baseball    Date(s) 06 / 03 / 22

Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency?    Yes  No     If no: City of Rancho Cucamonga

Name of Source

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

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
Government & Public Affairs	4	Tickets were received as part of a Sponsorship
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
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

**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.

	John Bosler	General Manager/CEO	06/16/22
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(month, day, year)</small>

Comment: \_\_\_\_\_