

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

**A Public Document**

<b>1. Agency Name</b> County of San Diego		COUNTY OF SAN DIEGO	California Form <b>802</b>
Division, Department, or Region (If Applicable) Treasurer-Tax Collector		2014 FEB 6 AM 9 32	For Official Use Only
Designated Agency Contact (Name, Title) Dan McAllister, Treasurer-Tax Collector		CLERK OF THE BOARD OF SUPERVISORS	
Area Code/Phone Number 619-531-5231	E-mail dan.mcallister@sdcounty.ca.gov	<input type="checkbox"/> 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 \$ \_\_\_\_\_ 175

Event Description Annual Awards Dinner Date(s) 03 / 23 / 13  
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes  No  If no: Carlsbad Chamber of Commerce  
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. • 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 <input checked="" type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Attendee was invited to serve as the Master of Ceremonies at Carlsbad Chamber of Commerce's Annual Dinner Awards
	1	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)/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.

Dan McAllister
Treasurer-Tax Collector
02/05/2014

Signature of Agency Head or Designee
Print Name
Title
(Month, Day, Year)