

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

A Public Document

## 1. Agency Name

County of San Diego

Division, Department, or Region (If Applicable)

Treasurer-Tax Collector

Designated Agency Contact (Name, Title)

Dan McAllister, Treasurer-Tax Collector

Area Code/Phone Number

619-531-5231

E-mail

dan.mcallister@sdcounty.ca.gov

COUNTY OF SAN DIEGO

Date Stamp

2013 NOV 20 AM 10 25

CLERK OF THE BOARD  
OF SUPERVISORS

California Form **802**

For Official Use Only

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 \$ \_\_\_\_\_ 250

Event Description Annual TMA Fall Conference  
Provide Title/Explanation

Date(s) 09 / 27 / 13

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

If no: Association for Financial Professionals  
Name of Source

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

If yes: McAllister, Dan  
Official's Name (Last, First)

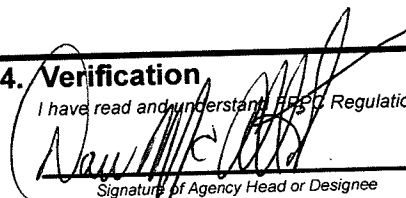
## 3. Recipients

• 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 <input checked="" type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: Attendee was the keynote speaker at the 30th Annual Treasury Management Association of San Diego Fall Conference.
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> 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

DAN MCALLISTER

Print Name

Treasurer-Tax Collector

Title

11, 18, 2013  
(Month, Day, Year)

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