

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions COUNTY OF SAN DIEGO A Public Document

1. Agency Name		Date Stamp	California Form 802
County of San Diego		2018 FEB 26 AM 10:50	For Official Use Only
Division, Department, or Region (if applicable)		CLERK OF THE BOARD OF SUPERVISORS	
Treasurer Tax Collector			
Designated Agency Contact (Name, Title)		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.)	
Dan McAllister, Treasurer Tax Collector		Date of Original Filing: _____ (month, day, year)	
Area Code/Phone Number	E-mail		
619-531-5231	dan.mcallister@sdcounty.ca.gov		

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 199.00

Event Description: SDAR Installation Circle of Excellence Date(s) 01 / 13 / 18
Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: SDAR
Name of Source

Was ticket distribution made at the behest of agency official? Yes No If yes: McAllister, Dan
Official's Name (Last, First)

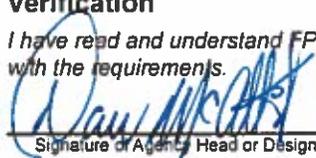
3. Recipients

• 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)/ Passes	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
McAllister, Dan	1	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> to attend
		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.


Dan McAllister
Treasurer Tax Collector
2-26-18
Signature of Agency Head or Designee
Print Name
Title
(month, day, year)