

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

**A Public Document**

<b>1. Agency Name</b> Orange County Water District <i>Division, Department, or Region (If Applicable)</i>		Date Stamp	<b>California Form 802</b> For Official Use Only
<b>Designated Agency Contact (Name, Title)</b> Michael R. Markus <i>GENERAL MGR</i>		<input type="checkbox"/> <b>Amendment</b> (Must provide explanation in Part 3.)	<b>Date of Original Filing:</b> _____ <i>(Month, Day, Year)</i>
<b>Area Code/Phone Number</b> (714) 378-3305	<b>E-mail</b> mmarkus@ocwd.com		

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes  No       Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 225.00

Event Description Bolsa Chica Conservancy Dinner      Date(s) 06 / 07 / 14 \_\_\_\_\_  
*Provide Title/Explanation*

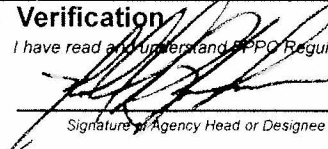
Ticket(s)/Pass(es) provided by agency?    Yes  No       If no: Bolsa Chica Conservancy  
*Name of Source*

Was ticket distribution made at the behest of agency official?    No  Yes       If yes: Markus, Michael - General Manager  
*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 <i>(Last, First)</i>	Number of Ticket(s)/Pass(es)	Identify one of the following:
Green, Cathy Green, Peter	/	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i> Member agency representation
		Ceremonial Role <input checked="" type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
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.*

	Michael R. Markus	General Manager	2/07/14
<i>Signature of Agency Head or Designee</i>	<i>Print Name</i>	<i>Title</i>	<i>(Month, Day, Year)</i>