

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

**A Public Document**

<b>1. Agency Name</b> Orange County Water District Division, Department, or Region (if applicable)		Date Stamp	<b>California Form 802</b> For Official Use Only
Designated Agency Contact (Name, Title) Michael R. Markus, General Manager			
Area Code/Phone Number 714-378-3305	E-mail mmarkus@ocwd.com	<input type="checkbox"/> <b>Amendment</b> (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 \$ 185.00

Event Description: Bolsa Chica Conservancy Benefit Date(s) 06 / 10 / 17  
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? Yes  No  If yes: Markus, Michael  
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
Orange County Water District Public Affairs	2	Member agency representation
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>
Cathy Green	2	Member Agency Representation
Bruce Whitaker	2	Member Agency Representation
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.

  
 Signature of Agency Head or Designee

Michael R. Markus  
 Print Name

General Manager  
 Title

06/23/17  
 (month, day, year)

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

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 Continuation Sheet

Agency Name

Orange County Water District

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B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Stephen Sheldon	2	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 type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
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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