## Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions 1. Agency Name

**A Public Document** 

١.	Agency Name				Date Stamp	California 802	
	Orange County Water District					For Official Use Only	
	Division, Department, or Reg	vision, Department, or Region (if applicable)				1 of Official Ose Offig	
	Designated Agency Contact (Name, Title)						
	Michael R. Markus, General Manager				Amendment (Must Provide Explanation in Part 3.)		
	Area Code/Phone Number   E-mail				Date of Original Filing:		
	714-378-3305	14-378-3305 mmarkus@ocwd.c					
2.	Function or Event Information						
	Does the agency have a ticl		ace Value of	Each Ticket/Pass \$ <sup>2</sup>			
	Event Description: So Cal Water Committee Dinner Date(s) 10				<u>, 26 , 17 </u>		
	Provide Title/ Explanation  Ticket(s)/Pass(es) provided by agency? Ves ⊠ No □ If no:						
					Name of Source	1	
	Was ticket distribution made at the behest $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$				, MIChael Official's Name (Last, First)		
	of agency official?				emolar o reame (Last, r net)		
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			
	Executive Management		2	agency representation			
	B. Name of Individual (Last, First)		Number of Ticket(s)/ Passes	Identify one of the following:			
	Stephen Sheldon		2 - 1*	1	Ceremonial Role Other X Income		
	·			If checking "Ceremonial Role" or "Other" describe below: agency representation			
	Vicente Sarmiento*			ļ			
	Denis Bilodeau		1	1	Ceremonial Role Other Management Income Income If checking "Ceremonial Role" or "Other" describe below:		
	C. Name of Outside O		Number of Ticket(s)/ Passes	Describe th	ne public purpose made pu	rsuant to the agency's policy	
_	Verification						
٠.	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.						
	All	el R. Markus		General Manager	11-27-17		
	Signature of Agency Head or Designee Print Name				Title	(month, day, year)	
	Comment:						