# Tickets Provided by Agency Report

## A Public Document

TICKETS PROVIDED BY AGENCY REPORT

**1. Agency Name**

City of Fresno

**Division, Department, or Region** *(if applicable)*

Facilities & Major Projects Division

**Street Address**

2101 G Street, Bldg. A, Fresno, CA 93706

**Area Code/Phone Number**: 559-621-1487

**E-mail**: facilitiesmgmt@fresno.gov

**Agency Contact** *(name and title)*

Melodee Schwamb, Management Analyst III

Date Stamp

**California Form 802**

For Official Use Only

☐ **Amendment** *(Must explain in Part 5.)*

**Date of Original Filing:** _____ *(month, day, year)*

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 05 / 20 / 10 Description of Event: Fresno Grizzlies Baseball Skybox Tickets

___ / ___ / ___ Face Value of Ticket: $ 376.00

Agency Event ☐ Yes ☒ No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Fresno Baseball, LLC

Number of Tickets Received: 12 Ticket(s) Provided to Agency: ☐ Gratuitously ☒ Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

| Name of Official (Last, First) | Number of Tickets | State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution |
|---|---|---|
| Scharton, Craig | 12 | To distribute according to section 18944.1 |
| | | |
| | | |

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Craig Scharton, Director of Downtown & Community Revitalization

Name of Individual or Organization: City of Fresno, Planning Department Number of Tickets: 12

Description of Organization: City Planning Department

Address of Organization: 2600 Fresno Street, Room 3043, Fresno, CA 93721
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

Recognition for meritorious services by City employees to promote enhanced performance or morale

**5. Verification**

*I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.*

| Signature of Agency Head or Designee | Print Name | Title | *(month, day, year)* |
|---|---|---|---|
| Melodee Schwamb | Melodee Schwamb | Management Analyst III | 5/28/2010 |

Comment: *(Use this space or an attachment for any additional information including amendment explanation.)*