

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

**A Public Document**

<b>1. Agency Name</b>		Date Stamp	<b>California Form 802</b>
County of Riverside Economic Development Agency			For Official Use Only
<b>Division, Department, or Region</b> (if applicable)			
County of Riverside Fair and National Date Festival			
<b>Designated Agency Contact</b> (Name, Title)		<input type="checkbox"/> <b>Amendment</b> (Must Provide Explanation in Part 3.)	
Heidi Marshall, Managing Director			
<b>Area Code/Phone Number</b>	<b>E-mail</b>	<b>Date of Original Filing:</b> _____ <small>(month, day, year)</small>	
951-955-1309	HMarshall@rivco.org		

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes     No     Face Value of Each Ticket/Pass \$ 10.00

Event Description: County of Riverside Fair    Date(s) 02 / 14 / 20    02 / 23 / 20  
Provide Title/Explanation

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

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

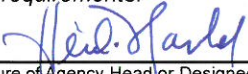
**3. Recipients**

• 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
See Attached list		
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>
		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.

 Signature of Agency Head or Designee	Heidi Marshall Print Name	Managing Director Title	02/26/2020 <small>(month, day, year)</small>
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Comment: \_\_\_\_\_

## 2020 Riverside County and National Date Festival Credential Issuance Report

Department	Tickets
Agricultural Commissioner	65
Animal Services	125
Assessors Clerk recorders-Desert Area	117
Board of Supervisors – 1 <sup>st</sup> District Office	10
Board of Supervisors – 2 <sup>nd</sup> District Office	17
Board of Supervisors – 3 <sup>rd</sup> District Office	10
Board of Supervisors – 5 <sup>th</sup> District Office	230
Cal Fire -Desert Area	137
Child Support Services	500
Clerk of the Board	40
Community Action Partnership	50
County Counsel	55
County Counsel-Desert Area	10
County Law Library	15
County Transportation-Desert Area	60
Department of Public Social Services	2500
District Attorney	1107
Economic Development Agency	916
Economic Development Agency -Salton Sea	15
Emergency Mgmt. Dept.	145
Executive Office	34
External Constituent-Linda Trumbauer	5
External Constituent-Irma Flores	6
External Constituent-Antonio Lopez Desert Area	2
Father's Heart Ranch	35
Fire Department Riverside County Fire Department	200
First Five	90
Human Resources	250
Mead & Hunt	4
Mental Health-Desert Area	14
Public Defenders Office	150
Public Defenders Office-Desert Area	79
Riverside County Informational Technology	190
Riverside County Regional Conservation Auth.	20
State Dept EDD-Desert Area	22
Treasurer Tax Collector	58
TLMA Riverside Area	769
Veterans Services	40
Waste Resources	460
Youth Advisory Council - 5th District	40