

Agency Report of:**Ceremonial Role Events and Ticket/Pass Distributions****A Public Document****1. Agency Name**

Marin Clean Energy

Division, Department, or Region (if applicable)

Designated Agency Contact (Name, Title)

Troy Nordquist, Compliance and Grants Manager

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Date Stamp

**California
Form 802**

For Official Use Only

 Amendment (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 \$ _____ 20Event Description: Pittsburg Seafood & Music Festival Date(s) 09 / 09 / 2023 09 / 10 / 2023

Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: Pittsburg Seafood & Music

Name of Source

Was ticket distribution made at the behest of agency official? Yes No If yes: Donato, Kiara

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
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Jackson, Darlene	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: Promote special events to which MCE is a party
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:
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.

DocuSigned by:

Dawn Weisz

Dawn weisz

CEO

10/13/2023

Signature of Agency Head or Designee

Print Name

Title

(month, day, year)

Comment: _____

Print**Clear**