## Docusign Envelope ID: F572027A-99EB-480E-BB93-ADE4E1A34695 Agency Report ot: Ceremonial Role Events and Ticket/Pass Distributions

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١.	Agency Name			Date Stamp	California Form 802			
	Marin Clean Energy							
	Division, Department, or Reg	ion (if applicable)			1	For Official Use Only		
	Designated Agency Contact (	Name, Title)	1					
	Troy Nordquist, Compliance	and Grants Manage	Amendment (14)	4 Describe Combonation in Dark 2)				
	Area Code/Phone Number	E-mail			Amendment (Must Provide Explanation in Part 3.)			
	(925) 378-6767	tnordquist@mcecleanenergy.org				Date of Original Filing:		
_	Function or Event Infor	mation .				(monut, auj, you)		
			Facility Talact (Date of	195				
	Does the agency have a tick		Each Ticket/Pass \$ .					
	Event Description: CEDMC	Spring Symposium 2	<u>/ 14 / 25 </u>					
		Provide Title/ Explar		anagement Council				
	Ticket(s)/Pass(es) provided	by agency? Yes [	no: OA EIIIC	ciency + Demand Ma	anagement Council			
	Was ticket distribution made	at the beheet w	yes: Nunez,	Jackie				
	of agency official?	at the benest Yes	■ No 🗆 🖐	ycs	Official's Name (Last, Firs	ot)		
	or agency official?							
3.	Recipients							
	Use Section A to identify the agent	cy's department or unit.	ual. Use Section C to ider	ntify an outside organization.				
			Number		Describe the public purpose made pursuant to the agency's policy			
	A. Name of Agency, Depa	of Ticket(s)/ Passes	Describe th					
			Number					
	B. Name of Individual (Last, First)		of Ticket(s)/ Passes	Identify one of the following:				
		,	1 40000	Coron	nonial Role  Other	Income		
	Stano, Wade		1		king "Ceremonial Role" or "Other"			
				Networking	with other commun	itv leaders		
				_				
					nonial Role  Other  king "Ceremonial Role" or "Other"			
			Number					
	C. Name of Outside O (include address and	of Ticket(s)/	Describe th	ne public purpose made p	suant to the agency's policy			
			Passes					
_								
1.	Verification							
	I have read and understand FP	PPC Regulations 18944	.1 and 18942.	I have verified	that the distribution se	t forth above, is in accordance		
	with the requirements.							
	Dawn Weisz	Dawn Weisz		CEC		9/24/2025		
	Signature of Agency Head or Design	nee Pr	rint Name		Title	(month, day, year)		
	Comment:							