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

A Public Document

1.	Agency Name				Date Stamp Received	California 802	
	City of Clovis				KeceiAed	Form For Official Use Only	
	Division, Department, or Region (if applicable)				MAR 0 9 2018	1 of Official Ose Offiny	
	Fire Department				(111111 0 3 2010		
	Designated Agency Contact (Name, Title)			ADMN/CITYMGR			
	John Binaski, Fire Chief			Amendment (Must P.	rovide Explanation in Part 3.)		
	4	a Code/Phone Number E-mail			Date of Original Filing: March 9, 2018 (month, day, year)		
	559-324-2260 j	binaski@gmail.com	1		Date of Original Filling.	(month, day, year)	
2.	Function or Event Information						
	Does the agency have a ticket policy? Yes ⊠ No □ Face Value of Each Ticket/Pass \$ 167						
	Event Description: Disneyland	<u>, 19 , 18 </u>	05 / 10 / 18				
	Provide Title/ Explanation						
					Name of Source		
	Was ticket distribution made at the behest Yes ☐ No ☒ If yes:				Official's Name (Last, First)		
	of agency official?						
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. Number of Agency, Department or Unit Describe the public purpose made pursuant to the agency's policy.					•	
	A. Name of Agency, Depart	ment or unit	of Ticket(s)/ Passes	Describe th	e public purpose made pur	suant to the agency's policy	
			Number				
	B. Name of Indivi		of Ticket(s)/ Passes		Identify one of the f	ollowing:	
	See attached list of Fire Department Personnel		2	Ceremonial Role Other M Income Tickets were given to all California Fire Departments which responded to the devastating wildland fires in 2017.			
					nonial Role Other Canada Role" or "Other" des		
	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. John Holt Assistant CM 3/9/2018						
	Signature of Agency Head or Designed	John Pri	nt Name	<u> </u>	SSISTANT CI	$\frac{3/9/2018}{\text{(nlonth flay, year)}}$	
	Comment:						

First Name	Last Name		
Greg	Adams		
Warren	Adams		
Richard	Archuleta		
Nick	Batrich		
Joshua	Bennett-Snow		
Bret	Black		
Christopher	Bridger		
Steve	Bringetto		
Ryan	Brubaker		
Joseph	Christl		
Cole	Clayton		
Troy	Coleman		
Bradley	Couchman		
Brian	Cox		
James	Damico		
Jeremy	Dobson		
Christopher	Doda		
Nicholas	Driver		
Michael	Dunkel		
Loriolenka	Einem		
Chad	Fitzgerald		
Paul	Gilman		
Shawn	Glynn		
Danny	Gonzales		
Thomas	Guice		
Jack	Jones		
Timothy	Lesmeister		
Andrew	Lovejoy		
Paul	Macias		
Michael	Масу		
James	Mc Lain		
Trenton	McGill		
Kory	Mullin		
Jason	Ralls		
Nolan	Stempson		
Colten	Tisinger		
Brian	Torosian		
Darryl	Turney		
Mark	Van Ornam		
Samuel	Wilson		
Timothy	Wilson		
Matthew	Winn		
Robert	Wright		
	Yandell		
Steven			
Jon	Young Ziegler		
Zachary	Trickiei		