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

### 1. Agency Name
- Tri-City Healthcare District
- Division, Department, or Region *(if applicable)*
- External Affairs Department
- Designated Agency Contact *(Name, Title)*
  - Aaron Byzak, Chief External Affairs Officer (designee)
- Area Code/Phone Number 760-940-5770
- E-mail mcdowells@tcmc.com

### 2. Function or Event Information
- Does the agency have a ticket policy? Yes ☒ No ☐
- Event Description: Elks Law & Order Awards Dinner
- Face Value of Each Ticket/Pass $20.00
- Date(s) 3 / 14 / 19
- Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
- If yes, Name of Source
- Was ticket distribution made at the behest of agency official? Yes ☐ No ☒
- If yes, 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.

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>CEO, CEAO</td>
<td>2</td>
<td>Ticket Policy Section III B Category 1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grass, Leigh Anne; Schallock, Larry; Grass, Andy;</td>
<td>3</td>
<td>Ticket Policy Section III B Category 1</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Outside Organization <em>(Include address and description)</em></th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oceanside Elks Lodge 444 Country Club Lane, Oceanside, CA 92054</td>
<td>5</td>
<td>Ticket Policy Section III B Category 1</td>
</tr>
</tbody>
</table>

### 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: 
- Agency Head or Designee
- Print Name: Aaron Byzak
- Title: Chief External Affairs Officer
- Date (month, day year): 10/1/19
- Comment:

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)