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 E-mail
   760-940-5770 mcdowells@tcme.com

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Face Value of Each Ticket/Pass $35.00
   Event Description: SM COC Meet Your Elected Officials
   Provide Title/Explaination
   Date(s) 7 / 25 / 19
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   If no: ____________________________
   If yes: ____________________________
   Name of Source
   Official's Name (Last, First)
   Was ticket distribution made at the behest of agency official?
   Yes ☐ No ☑

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>A.</th>
<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></td>
<td>CEAO, General Counsel, COO</td>
<td>3</td>
<td>Ticket Policy Section III B Category 1</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B.</td>
<td>Name of Individual (Last, First)</td>
<td>Number of Ticket(s)/Passes</td>
<td>Identify one of the following:</td>
</tr>
<tr>
<td></td>
<td>Paroly, Jennifer; Garcia, Celia; Shrader, Jessica</td>
<td>3</td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Ticket Policy Section III B Category 1</td>
</tr>
<tr>
<td>C.</td>
<td>Name of Outside Organization (include address and description)</td>
<td>Number of Ticket(s)/Passes</td>
<td>Describe the public purpose made pursuant to the agency's policy</td>
</tr>
<tr>
<td></td>
<td>San Marcos Chamber of Commerce 251 NorthCityDr #128, San Marcos, CA 92078</td>
<td>6</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 of Agency Head or Designee
   Aaron Byzak
   Print Name
   Chief External Affairs Officer
   Title
   Date Stamp
   7/25/19
   California Form 802
   For Official Use Only