

**Tickets Provided by
Agency Report**

A Public Document

TICKETS PROVIDED BY
AGENCY REPORT

1. Agency Name

Orange County Great Park Corporation
Division, Department, or Region (if applicable)

Street Address

7000 Trabuco Road, Irvine, CA 92618

Area Code/Phone Number

949-724-7414

E-mail

mdickens@ocgp.org

Agency Contact (name and title)

Marie Dickens, Clerk of the Board

☐ Amendment (Must explain in Part 5.)

Date of Original Filing: 01-20-10
(month, day, year)

California
Form **802**
For Official Use Only

2. Event For Which Tickets Were Distributed

Date(s) of Event: 01 / 08 / 10 Description of Event: Cirque du Soleil - KOOZA (dress rehearsal for event)

Face Value of Ticket: \$ 0

Agency Event ☐ Yes ☒ No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Cirque du Soleil

Number of Tickets Received: 25 Ticket(s) Provided to Agency: ☒ Gratuitously ☐ Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
MICHAEL D. ELLZEY, CEO	25	Supporting programs rendered by charitable organizations benefiting Irvine residents

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Michael D. Ellzey, Chief Executive Officer

Name of Individual or Organization: Families Forward Number of Tickets: 25

Description of Organization: Charity

Address of Organization: 9221 Irvine Blvd. Irvine CA 92618
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

Supporting programs rendered by charitable organizations benefiting Irvine residents.

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

Signature of Agency Head or Designee

Sean Joyce

Print Name

City Manager

Title

01-20-10

(month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)