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

1. Agency Name
City of Indian Wells
Division, Department, or Region (If Applicable)
City Manager
Designated Agency Contact (Name, Title)
Wade G. McKinney, City Manager
Area Code/Phone Number (760) 346-2489
E-mail wmckinney@indianwells.com

2. Function or Event Information
Does the agency have a ticket policy? Yes ☒ No ☐
Event Description Desert Lexus Jazz Festival
Provide Title/Explanation
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
If no: Indian Wells Tennis Garden
Name of Source
Was ticket distribution made at the behest of agency official? No ☒ Yes ☐
If yes: Official's Name (Last, First)
Face Value of Each Ticket/Pass $ 150.00-Each
Date(s) 5 / 3 / 14

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. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hanson, Doug</td>
<td>2</td>
<td>Ceremonial Role ☐ Other ☒ Income ☐</td>
</tr>
<tr>
<td>Mertens, Ted</td>
<td>2</td>
<td>Ticket Policy 2.10.060 (B)</td>
</tr>
<tr>
<td>Samuelson, Nancy</td>
<td>2</td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
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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.

Wade G. McKinney
City Manager

5/21/14
(Month, Day, Year)

Comment: