

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

A Public Document

1. Agency Name City of Redlands		Date Stamp FILED APR 23 2026	California Form 802 For Official Use Only
Division, Department, or Region (if applicable)			
Designated Agency Contact (Name, Title) Jeanne Donaldson, City Clerk		Redlands City Clerk	
Area Code/Phone Number (909) 798-7532	E-mail jdonaldson@cityofredlands.org	<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: <u>04/23/2026</u> <small>(month, day, year)</small>	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 0.00

Event Description: Redlands Bicycle Classic Date(s) 04/10/2026 04/12/2026
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: Redlands Bicycle Classic Committee
Name of Source

Was ticket distribution made at the behest of agency official? Yes No If yes: Donaldson, Jeanne
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.

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
City Council Members	5	Support of local annual event
City Manager's Office & Executive Staff	8	Support of local annual event
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
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.

Jeanne Donaldson	Jeanne Donaldson	City Clerk	04/23/26
Digitally signed by Jeanne Donaldson Date: 2026.04.23 09:56:00 -0700	Signature of Agency Head or Designee	Print Name	Title (month, day, year)

Comment: _____