

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

A Public Document

1. Agency Name CITY OF WEST COVINA		Date Stamp RECEIVED 2018 MAR -5 AM 10: 59 CITY OF WEST COVINA CITY CLERK'S OFFICE	California Form 802 For Official Use Only 2018 MAR -5 AM 10: 59
Division, Department, or Region (if applicable) CITY COUNCIL			<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _____ (month, day, year)
Designated Agency Contact (Name, Title) LLOYD JOHNSON			
Area Code/Phone Number 626-939-8401	E-mail lloyd.johnson@westcovina.org		

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 150.00

Event Description: C.W.B.A. of CA Inauguration Dinner Date(s) 2 / 11 / 18 2 / 11 / 18
Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: C.W.B.A. OF CALIFORNIA
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.

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
LLOYD JOHNSON	1	Ceremonial Role <input checked="" type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> MAYOR PRO TEM OF THE CITY OF WEST COVINA
		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.

 Signature of Agency Head or Designee	LLOYD JOHNSON Print Name	MAYOR PRO TEM Title	3/5/2018 (month, day, year)
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Comment: NONE



Chinese Women's Business Association of California

中華工商婦女企業管理協會-加州分會

\$150

C.W.B.A. of California Inauguration Gala Dinner Banquet

Date: Sunday, February, 11th, 2018

Social Hour: 5:30PM

Ceremony: 6:30PM

Venue: Pacific Palm Resort

1 Industry Hills Pkwy

City of Industry, CA 91744

此次典禮將於6:30PM開始用餐，請嘉賓們準時到場。感謝！

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California One Investment Center LLC

加州一等投資中心

780 Nogales St., #D, City Of Industry, CA 91748

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Website: www.coiccenter.com



电子商务平台:

三方物流:

区域中心:

高端私人定制:

美國亚马逊 Top 10 平台, 2016 E-Bay Top One 平台

报关, 卡车, 仓储, 空运, 海运; 全美 50 强客户

项目開發, 7-eleven 連鎖直投

國際峰会, 殿堂級演讲, 名人访谈