

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

A Public Document

1. Agency Name
City and County of San Francisco, Office of the Mayor
Division, Department, or Region (if applicable)

Date Stamp

California
Form **802**
For Official Use Only

Designated Agency Contact (Name, Title) Dexter Darmali, Legislative & Ethics Secretary		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3) Date of Original Filing: _____ (month, day, year)
Area Code/Phone Number 4155546141	E-mail dexter.darmali@sfgov.org	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 100.00
 Event Description: Bay Lights Grand Lighting event Date(s) 03/20/2026
 Ticket(s)/Pass(es) provided by agency? Yes No If no: Illuminate, David Hatfield
Provide Title/Explanation
 Was ticket distribution made at the behest of agency official? Yes No If yes: _____
Name of Source _____
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) Segal, Ned	Number of Ticket(s)/ Passes <u>1</u>	Identify one of the following: Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below.</small> Monitoring public facilities, supporting cultural activities Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below.</small> Income <input type="checkbox"/>
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.

Dexter Darmali Signature of Agency Head or Designee
 Dexter Darmali Print Name
 Legislative & Ethics Secretary Title
 4/8/2026 (month, day, year)

Comment: _____

Print

Clear