

**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 Darmail, Legislative & Ethics Secretary

Area Code/Phone Number

415-554-6141

E-mail

dexter.darmail@sfgov.org

☐ **Amendment** (Must Provide Explanation in Part 3.)

Date of Original Filing: _____
(month, day, year)

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass \$ 194.00

Event Description: FISHER concert Date(s) 12/20/2025 _____

Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: Danny Bell, Goldenvoice _____

Name of Source

Was ticket distribution made at the behest Yes ☐ No ☒ If yes: _____
of agency official? 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:
Polsell, Angelina	1	<div>Ceremonial Role <input checked="" type="checkbox"/> Other <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: Presentation of Certificate <div>Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: Income <input type="checkbox"/></div></div>
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 Darmail
Signature of Agency Head or Designee

Dexter Darmail

Print Name

Legislative & Ethics Secretary

Title

01/16/2026

(month, day, year)

Comment: _____

Print

Clear