

Tickets Provided by Agency Report

A Public Document

TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp RECEIVED CITY CLERKS OFFICE	California Form 802
CITY OF REDDING		MAY 26 2011	For Official Use Only
Division, Department, or Region (if applicable)			
CONVENTION CENTER		BY: _____	
Street Address			
700 AUDITORIUM DRIVE			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must explain in Part 5.)	
530-225-4124	jjohnson@ci.redding.ca.us	Date of Original Filing: _____ (month, day, year)	
Agency Contact (name and title)			
JOHN JOHNSON, GENERAL MANAGER			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 5, 19, 11 Description of Event: Redding Rodeo

Face Value of Ticket: \$ 13⁰⁰ per ticket

Agency Event Yes No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Redding Rodeo Assoc.

Number of Tickets Received: 4 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: Marsha Caranci Number of Tickets: 4

Description of Organization: _____

Address of Organization: 912 Riverbend Rd Redding Ca 96003

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
PROMOTION OF CITY FACILITIES - May Newsletter winner

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

Signature of Agency Head or Designee: [Signature] JOHN JOHNSON GENERAL MANAGER 5/26/11
Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp RECEIVED CITY CLERKS OFFICE	California Form 802 For Official Use Only
CITY OF REDDING		MAY 26 2011	
Division, Department, or Region (if applicable)			
CONVENTION CENTER		BY: _____	
Street Address		<input type="checkbox"/> Amendment (Must explain in Part 5) Date of Original Filing: _____ <small>(month, day, year)</small>	
700 AUDITORIUM DRIVE			
Area Code/Phone Number	E-mail		
530-225-4124	jjohnson@ci.redding.ca.us		
Agency Contact (name and title)			
JOHN JOHNSON, GENERAL MANAGER			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 5, 20, 11 Description of Event: Redding Rodeo

Face Value of Ticket: \$ 13⁰⁰ per ticket

Agency Event Yes No (Identify source of tickets below)

Name of Outside Source of Ticket(s) Provided to Agency: Redding Rodeo Assoc.

Number of Tickets Received: 4 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: Mike Staggs Number of Tickets: 4

Description of Organization: _____

Address of Organization: 22193 Roe Way Cottonwood CA 96032

Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

PROMOTION OF CITY FACILITIES - May Newsletter winner

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

JOHN JOHNSON
GENERAL MANAGER
5/26/11
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
CITY OF REDDING		RECEIVED CITY CLERKS OFFICE MAY 26 2011	
Division, Department, or Region (if applicable)			
CONVENTION CENTER			
Street Address			
700 AUDITORIUM DRIVE			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must explain in Part 5)	
530-225-4124	jjohnson@ci.redding.ca.us	Date of Original Filing: _____ (month, day, year)	
Agency Contact (name and title)			
JOHN JOHNSON, GENERAL MANAGER			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 5, 19, 11 Description of Event: Redding Rodeo
 _____ Face Value of Ticket: \$ 13⁰⁰ per ticket

Agency Event Yes No (Identify source of tickets below.)
 Name of Outside Source of Ticket(s) Provided to Agency: Redding Rodeo Assoc.
 Number of Tickets Received: 4 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: Whitney Brown Number of Tickets: 4

Description of Organization: _____

Address of Organization: 17167 Summerfield Redding Ca 96002
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
PROMOTION OF CITY FACILITIES - May Newsletter Winner

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

[Signature] JOHN JOHNSON GENERAL MANAGER 5/26/11
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp RECEIVED CITY CLERKS OFFICE	California Form 802
CITY OF REDDING		APR 18 2011	For Official Use Only
Division, Department, or Region (if applicable)			
CONVENTION CENTER		BY: _____	
Street Address			
700 AUDITORIUM DRIVE			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must explain in Part 5.)	
530-225-4124	jjohnson@ci.redding.ca.us	Date of Original Filing: _____	(month, day, year)
Agency Contact (name and title)			
JOHN JOHNSON, GENERAL MANAGER			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 5, 11, 11 Description of Event: Elmos Healthy Heroes

Face Value of Ticket: \$ 21.50 per ticket

Agency Event Yes No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: VEE Corporation

Number of Tickets Received: 4 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: _____ Number of Tickets: 4

Description of Organization: Dellene Ott

Address of Organization: 4480 Crimsonwood Redding Ca 96001

Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

PROMOTION OF CITY FACILITIES - Newsletter contest winner

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

Signature of Agency Head or Designee: [Signature] JOHN JOHNSON GENERAL MANAGER 4/13/11

Print Name Title ((month/day/year))

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
CITY OF REDDING		RECEIVED CITY CLERKS OFFICE MAR 16 2011	
Division, Department, or Region (if applicable)			BY:
CONVENTION CENTER		<input type="checkbox"/> Amendment (Must explain in Part 5.)	
Street Address		Date of Original Filing: _____ (month, day, year)	
700 AUDITORIUM DRIVE			
Area Code/Phone Number	E-mail		
530-225-4124	jjohnson@ci.redding.ca.us		
Agency Contact (name and title)			
JOHN JOHNSON, GENERAL MANAGER			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 4, 28, 11 Description of Event: Josh Turner w/ Josh Cerven

Face Value of Ticket: \$ 49.50

Agency Event Yes No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Bill Burr

Number of Tickets Received: 2 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: _____ Number of Tickets: _____

Description of Organization: Tyler Rowley

Address of Organization: 6916 River Dr Redding Ca 96001
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
PROMOTION OF CITY FACILITIES - Contest winner

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

[Signature] JOHN JOHNSON GENERAL MANAGER 3/15/11
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
CITY OF REDDING		RECEIVED	
Division, Department, or Region (if applicable)		CITY CLERKS OFFICE	
CONVENTION CENTER		FEB 25 2011	
Street Address		BY: _____	
700 AUDITORIUM DRIVE			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must explain in Part 5.)	
530-225-4124	jjohnson@ci.redding.ca.us	Date of Original Filing: _____ (month, day, year)	
Agency Contact (name and title)			
JOHN JOHNSON, GENERAL MANAGER			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 04/28/2011 Description of Event: Josh Turner

Face Value of Ticket: \$ 49.50

Agency Event Yes No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Bill Barr

Number of Tickets Received: 2 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: _____ Number of Tickets: 2

Description of Organization: Wings of Angels

Address of Organization: 6907 Weeks Rd Redding Ca 96002

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

PROMOTION OF CITY FACILITIES

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

Signature of Agency Head or Designee: [Signature] JOHN JOHNSON GENERAL MANAGER 2/24/11

Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

Tickets Provided by Agency Report

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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp RECEIVED CITY CLERKS OFFICE FEB 15 2011	California Form 802 For Official Use Only
CITY OF REDDING		BY: _____	
Division, Department, or Region (if applicable)			
CONVENTION CENTER			
Street Address			
700 AUDITORIUM DRIVE			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must explain in Part 5)	
530-225-4124	jjohnson@ci.redding.ca.us	Date of Original Filing: _____ (month, day, year)	
Agency Contact (name and title)			
JOHN JOHNSON, GENERAL MANAGER			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 04/28/2011 Description of Event: Josh Turner w/ Easton Corbin

Face Value of Ticket: \$ 59.50

Agency Event Yes No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Bill Barr

Number of Tickets Received: 2 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: _____ Number of Tickets: 2

Description of Organization: Brook Luiz

Address of Organization: PO Box 206 Arbuckle Ca 95912
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
PROMOTION OF CITY FACILITIES - Contest winner

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

Signature of Agency Head or Designee: _____ JOHN JOHNSON _____ GENERAL MANAGER _____ 2/15/11 _____
Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

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1. Agency Name		Date Stamp	California Form 802
CITY OF REDDING		RECEIVED CITY CLERKS OFFICE JAN 19 2011	For Official Use Only
Division, Department, or Region (if applicable)			
CONVENTION CENTER			
Street Address			
700 AUDITORIUM DRIVE			
Area Code/Phone Number	E-mail	BY: <input type="checkbox"/> Amendment (Must explain in Part 5.)	
530-225-4124	jjohnson@ci.redding.ca.us	Date of Original Filing: _____ (month, day, year)	
Agency Contact (name and title)			
JOHN JOHNSON, GENERAL MANAGER			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 4/1/11 Description of Event: SCCA - French Chamber Orchestra

Face Value of Ticket: \$ 35.00

Agency Event Yes No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Shasta Community Concert Assoc.

Number of Tickets Received: 2 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: _____ Number of Tickets: _____

Description of Organization: UPREP


Address of Organization: 2200 Eureka Way Redding Ca 96001

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

PROMOTION OF CITY FACILITIES

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.


 _____ JOHN JOHNSON _____ GENERAL MANAGER _____ 1/18/11
 Signature of Agency Head or Designee Print Name Title (month/day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802
CITY OF REDDING		RECEIVED CITY CLERKS OFFICE JAN 19 2011	For Official Use Only
Division, Department, or Region (if applicable)			
CONVENTION CENTER		BY: _____	
Street Address			
700 AUDITORIUM DRIVE		<input type="checkbox"/> Amendment (Must explain in Part 5)	
Area Code/Phone Number	E-mail	Date of Original Filing: _____	
530-225-4124	jjohnson@ci.redding.ca.us	(month, day, year)	
Agency Contact (name and title)			
JOHN JOHNSON, GENERAL MANAGER			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 2 / 3 / 11 Description of Event: Legally Blonde

Face Value of Ticket: \$ 48.00 x 4 tickets

Agency Event Yes No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Jam Theatricals

Number of Tickets Received: 4 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: Whitney Brown Number of Tickets: _____

Description of Organization: _____

Address of Organization: 1767 Summerfield Ct. Redding Ca 96002

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

PROMOTION OF CITY FACILITIES Job Newsletter contest winner

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

Signature of Agency Head or Designee: [Signature] JOHN JOHNSON GENERAL MANAGER 1/18/11

Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

Tickets Provided by Agency Report

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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802
CITY OF REDDING		RECEIVED CITY CLERKS OFFICE JAN 18 2011	For Official Use Only
Division, Department, or Region (if applicable)			
CONVENTION CENTER		BY:	
Street Address		<input type="checkbox"/> Amendment (Must explain in Part 5.)	
700 AUDITORIUM DRIVE		Date of Original Filing: _____ (month, day, year)	
Area Code/Phone Number	E-mail		
530-225-4124	jjohnson@ci.redding.ca.us		
Agency Contact (name and title)			
JOHN JOHNSON, GENERAL MANAGER			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 4/28/11 Description of Event: Josh Turner
 Face Value of Ticket: \$ 58.50 X 2

Agency Event Yes No (Identify source of tickets below.)
 Name of Outside Source of Ticket(s) Provided to Agency: Bill Barr

Number of Tickets Received: 2 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: Del Turner Number of Tickets: 2

Description of Organization: Convention Center Photos

Address of Organization: _____
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
PROMOTION OF CITY FACILITIES

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

[Signature] JOHN JOHNSON GENERAL MANAGER 1/17/11
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

Tickets Provided by Agency Report

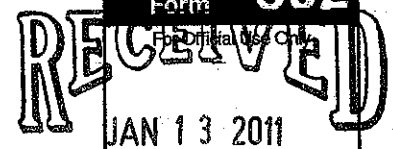
A Public Document

TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name

Date Stamp

California Form **802**



CITY OF REDDING
Division, Department, or Region (if applicable)

CONVENTION CENTER
Street Address

700 AUDITORIUM DRIVE
Area Code/Phone Number

E-mail
jjohnson@ci.redding.ca.us

Agency Contact (name and title)
JOHN JOHNSON, GENERAL MANAGER

CITY CLERK'S OFFICE
 Amendment (Must explain in Part 5)
BY: _____
Date of Original Filing: _____
(month, day, year)

2. Event For Which Tickets Were Distributed

Date(s) of Event: 02, 27, 11 Description of Event: The Rat Pack is Back
Face Value of Ticket: \$ 52.00

Agency Event Yes No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Jam Theatricals

Number of Tickets Received: 2 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: Shasta Women's Refuge Number of Tickets: 2

Description of Organization: _____

Address of Organization: 2280-A Benton Dr. Redding Ca 96003
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

PROMOTION OF CITY FACILITIES

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

Signature of Agency Head or Designee: [Signature] JOHN JOHNSON GENERAL MANAGER 1/15/11
Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

Tickets Provided by Agency Report

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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name

CITY OF REDDING
 Division, Department, or Region (if applicable)
 CONVENTION CENTER
 Street Address
 700 AUDITORIUM DRIVE
 Area Code/Phone Number | E-mail
 530-225-4124 | jjohnson@ci.redding.ca.us
 Agency Contact (name and title)
 JOHN JOHNSON, GENERAL MANAGER

Date Stamp
RECEIVED
 DEC 15 2010
 California Form **802**
 For Official Use Only
CITY CLERK'S OFFICE
 BY: Amendment (Must explain in Part 5)
 Date of Original Filing: _____
 (month, day, year)

2. Event For Which Tickets Were Distributed

Date(s) of Event: 01/12/11 Description of Event: Grease
 _____ Face Value of Ticket: \$ 52⁰⁰
 Agency Event Yes No (Identify source of tickets below.)
 Name of Outside Source of Ticket(s) Provided to Agency: Jam Theatricals
 Number of Tickets Received: 2 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON
 Name of Individual or Organization: _____ Number of Tickets: _____
 Description of Organization: Angelina Adena
 Address of Organization: 4555 Riddle Rd Shasta Lake Ca 96019
Number and Street City State Zip Code
 Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
PROMOTION OF CITY FACILITIES - Contest winner

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

[Signature] JOHN JOHNSON GENERAL MANAGER 12/15/10
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802
CITY OF REDDING		RECEIVED CITY CLERKS OFFICE DEC 09 2010 BY: _____	For Official Use Only
Division, Department, or Region (if applicable)			
CONVENTION CENTER			
Street Address		<input type="checkbox"/> Amendment (Must explain in Part 5.)	
700 AUDITORIUM DRIVE		Date of Original Filing: _____ (month, day, year)	
Area Code/Phone Number	E-mail		
530-225-4124	jjohnson@ci.redding.ca.us		
Agency Contact (name and title)			
JOHN JOHNSON, GENERAL MANAGER			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 12, 7, 10 Description of Event: Oak Ridge Boys Christmas
 _____ Face Value of Ticket: \$ 53 per ticket

Agency Event Yes No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Stonebridge Productions

Number of Tickets Received: 2 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: Linda Kaplanis Number of Tickets: 2

Description of Organization: _____

Address of Organization: 986 Leisha Ln Redding Ca 96001
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
PROMOTION OF CITY FACILITIES - Contest winner

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

[Signature] JOHN JOHNSON GENERAL MANAGER 12/7/10
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

Redding Convention Center - LIVE

Guestid: 50542 Redding Convention Center
--

Orderid:	116555		PAID
Type:	SALE		
Sale Method:	Comp		
Delivery Method:	Walk Up		

Attention: Linda Kaplanis contest winner of two tickets, Note 1: 247-7017 986 Leisha Ln Redding 95501 <i>96001</i>

<u>YEAR</u>	<u>EVENT</u>	<u>TITLE</u>	<u>DAY</u>	<u>DATE</u>	<u>TIME</u>	<u>QTY</u>	<u>CHARGES</u>
2010	1207OAKRB730	OAK RIDGE BOYS DEC. 7TH	TUE	12/07/2010	07:30pm	2	\$0.00
	COMP 10 X 6, 5						

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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name CITY OF REDDING		Date Stamp	California Form 802
Division, Department, or Region (if applicable)		RECEIVED CITY CLERKS OFFICE DEC 09 2010	For Official Use Only
CONVENTION CENTER			
Street Address			
700 AUDITORIUM DRIVE			
Area Code/Phone Number	E-mail	BY: <input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ <small>(month, day, year)</small>	
530-225-4124	jjohnson@ci.redding.ca.us		
Agency Contact (name and title)			
JOHN JOHNSON, GENERAL MANAGER			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 2, 3, 11 Description of Event: Legally Blonde
 _____ Face Value of Ticket: \$ 52⁰⁰ per ticket

Agency Event Yes No (Identify source of tickets below.)
 Name of Outside Source of Ticket(s) Provided to Agency: Jam Theatricals

Number of Tickets Received: 2 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: _____ Number of Tickets: 2

Description of Organization: Greater Redding Chamber of Commerce

Address of Organization: 747 Auditorium Drive Redding Ca 96001
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
PROMOTION OF CITY FACILITIES for Chamber Mixer

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

[Signature] JOHN JOHNSON GENERAL MANAGER 12/8/10
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

Redding Convention Center - LIVE			
Guestid: 50542 Redding Convention Center			
Orderid:	116739		PAID
Type:	SALE		
Sale Method:	Comp		
Delivery Method:	Walk Up		
Attention: Per John Johnson for the Chamber Mixer 12/8/10			
<u>YEAR</u>	<u>EVENT</u>	<u>TITLE</u>	<u>DAY DATE</u> <u>TIME</u> <u>QTY</u> <u>CHARGES</u>
2010	0203BLONDE11	LEGALLY BLONDE-	02/03/2011 THU 02/03/2011 07:30pm 2 \$0.00
COMP 9 T 14, 13			

<small>Ticket No</small>	<small>Price</small>	<small>Price</small> MAIL / WILL CALL
GUESTID: 50542 Redding Convention Center: John Johnson		Thursday 02/03/11 7:30 PM US BANK PRESENTS LEGALLY BLONDE
X _____		NUMBER OF TICKETS: 2 ORDERID: 116739

NOT A TICKET

Tickets Provided by Agency Report

A Public Document

TICKETS PROVIDED BY AGENCY REPORT

<p>1. Agency Name</p> <p>CITY OF REDDING</p> <p>Division, Department, or Region (if applicable)</p> <p>CONVENTION CENTER</p> <p>Street Address</p> <p>700 AUDITORIUM DRIVE</p> <p>Area Code/Phone Number E-mail</p> <p>530-225-4124 jjohnson@ci.redding.ca.us</p> <p>Agency Contact (name and title)</p> <p>JOHN JOHNSON, GENERAL MANAGER</p>	<p>Date Stamp</p>	<p>California Form 802</p> <p>For Official Use Only</p> <p>RECEIVED</p> <p>CITY CLERKS OFFICE</p> <p>NOV 11 2010</p>
<p><input type="checkbox"/> Amendment (Must explain in Part 5)</p>		<p>BY: _____</p>
<p>Date of Original Filing: _____</p> <p>(month, day, year)</p>		

2. Event For Which Tickets Were Distributed

Date(s) of Event: 12, 7, 10 Description of Event: Oak Ridge Boys

Face Value of Ticket: \$ 53.00

Agency Event Yes No (Identify source of tickets below.) \$ 212.00 value

Name of Outside Source of Ticket(s) Provided to Agency: _____

Number of Tickets Received: 4 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: SALVATION ARMY / MISSION FOOD BANK Number of Tickets: 4

Description of Organization: Stuff A Truck FOOD BANK EVENT

Address of Organization: _____

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

PROMOTION OF CITY FACILITIES

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

Signature of Agency Head or Designee: [Signature] Print Name: JOHN JOHNSON Title: GENERAL MANAGER Date: 11/11/10

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

Tickets Provided by Agency Report

A Public Document

TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802
CITY OF REDDING		RECEIVED CITY CLERKS OFFICE OCT 21 2010 BY: <u>PG</u>	For Official Use Only
Division, Department, or Region (if applicable)			
CONVENTION CENTER			
Street Address		<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ <small>(month, day, year)</small>	
700 AUDITORIUM DRIVE			
Area Code/Phone Number	E-mail		
530-225-4124	jjohnson@ci.redding.ca.us		
Agency Contact (name and title)			
JOHN JOHNSON, GENERAL MANAGER			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 12/07/10 Description of Event: Oak Ridge Boys Christmas
 _____ Face Value of Ticket: \$ 53.00 x 2 tickets

Agency Event Yes No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Stonebridge Productions

Number of Tickets Received: _____ Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: Del Turner Number of Tickets: 2

Description of Organization: CONVENTION CENTER PHOTOS

Address of Organization: _____
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
PROMOTION OF CITY FACILITIES

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

[Signature] JOHN JOHNSON GENERAL MANAGER 12/19/10
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

Tickets Provided by Agency Report

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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802 RECEIVED CITY CLERKS OFFICE OCT - 5 2010 BY: _____ <input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)
CITY OF REDDING			
Division, Department, or Region (if applicable)			
CONVENTION CENTER			
Street Address			
700 AUDITORIUM DRIVE			
Area Code/Phone Number	E-mail		
530-225-4124	jjohnson@ci.redding.ca.us		
Agency Contact (name and title)			
JOHN JOHNSON, GENERAL MANAGER			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 10, 15, 10 Description of Event: Bon White Live

Face Value of Ticket: \$ 50.75 x 2

Agency Event Yes No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Bon White Tater Salad L.L.C.

Number of Tickets Received: 2 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: Sandra Weber Number of Tickets: 2

Description of Organization: _____

Address of Organization: 1038 Grouse St Redding CA 96003

Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

PROMOTION OF CITY FACILITIES - Contest winner

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

Signature of Agency Head or Designee: [Signature] JOHN JOHNSON GENERAL MANAGER 10/5/10

Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

Tickets Provided by Agency Report

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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name CITY OF REDDING		Date Stamp	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) CONVENTION CENTER		RECEIVED CITY CLERKS OFFICE SEP 29 2010	
Street Address 700 AUDITORIUM DRIVE		BY: <u>RG</u>	
Area Code/Phone Number 530-225-4124	E-mail jjohnson@ci.redding.ca.us	<input type="checkbox"/> Amendment (Must explain in Part 5.)	
Agency Contact (name and title) JOHN JOHNSON, GENERAL MANAGER		Date of Original Filing: _____ (month, day, year)	

2. Event For Which Tickets Were Distributed

Date(s) of Event: 10, 15, 2010 Description of Event: Bon White Live
 _____ Face Value of Ticket: \$ 50.75 x 4 = \$203.00

Agency Event Yes No (Identify source of tickets below.)
 Name of Outside Source of Ticket(s) Provided to Agency: Tater Salad LLC

Number of Tickets Received: 4 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: Lakehead Community Dev. Number of Tickets: 4

Description of Organization: _____

Address of Organization: PO Box 322, Lakehead CA 96051
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
PROMOTION OF CITY FACILITIES

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

[Signature] JOHN JOHNSON GENERAL MANAGER 9/29/10
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

Tickets Provided by Agency Report

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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp RECEIVED CITY CLERKS OFFICE SEP 28 2010	California Form 802 For Official Use Only
CITY OF REDDING Division, Department, or Region (if applicable) CONVENTION CENTER Street Address 700 AUDITORIUM DRIVE			
Area Code/Phone Number 530-225-4124	E-mail jjohnson@ci.redding.ca.us	<input type="checkbox"/> Amendment (Must explain in Part 5) Date of Original Filing: _____ (month, day, year)	
Agency Contact (name and title) JOHN JOHNSON, GENERAL MANAGER			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 10, 15, 10 Description of Event: Ron White Lwe
 _____ Face Value of Ticket: \$ 50.75 x 2 = \$101.50

Agency Event Yes No (Identify source of tickets below.)
 Name of Outside Source of Ticket(s) Provided to Agency: Tater Salad L.L.C.
 Number of Tickets Received: 2 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: Cottonwood's Foundation for Excellent Schools Number of Tickets: 2
 Description of Organization: Rep. Staci Helams

Address of Organization: P.O. Box 1186 Cottonwood CA 96022
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
PROMOTION OF CITY FACILITIES

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

[Signature] JOHN JOHNSON GENERAL MANAGER
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

**Tickets Provided by
Agency Report**

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TICKETS PROVIDED BY
AGENCY REPORT

1. Agency Name		Date Stamp RECEIVED CITY CLERKS OFFICE	California Form 802 For Official Use Only
CITY OF REDDING		SEP - 9 2010	
Division, Department, or Region (if applicable) CONVENTION CENTER			
Street Address 700 AUDITORIUM DRIVE		BY: _____	
Area Code/Phone Number 530-225-4124	E-mail jjohnson@ci.redding.ca.us	<input type="checkbox"/> Amendment (Must explain in Part 5) Date of Original Filing: _____ <small>(month, day, year)</small>	
Agency Contact (name and title) JOHN JOHNSON, GENERAL MANAGER			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 09, 24, 10 Description of Event: Cheech & Chong Live
 _____ Face Value of Ticket: \$ 47.50 per ticket

Agency Event Yes No (Identify source of tickets below.)
 Name of Outside Source of Ticket(s) Provided to Agency: Live Nation

Number of Tickets Received: 2 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: Vickie Shattuck Number of Tickets: 2

Description of Organization: REDDING CHAMBER AUCTIOW

Address of Organization: 5750 Live Oak Lane Redding CA 96001
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
PROMOTION OF CITY FACILITIES

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

[Signature] JOHN JOHNSON GENERAL MANAGER 9/8/10
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

Tickets Provided by Agency Report

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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
CITY OF REDDING			
Division, Department, or Region (if applicable)			
CONVENTION CENTER			
Street Address			
700 AUDITORIUM DRIVE			
Area Code/Phone Number	E-mail		
530-225-4124	jjohnson@ci.redding.ca.us	<input type="checkbox"/> Amendment (Must explain in Part 5.)	
Agency Contact (name and title)		Date of Original Filing: _____ (month, day, year)	
JOHN JOHNSON, GENERAL MANAGER			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 01, 12, 11 Description of Event: Grease & Legally Blonde
02, 03, 11 Face Value of Ticket: \$ 52.00 - Grease @ 21 = 104 -
52.00 - Legally Blonde @ 2 = 104 -
Total \$208.00

Agency Event Yes No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Jam Theatricals

Number of Tickets Received: 4 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: KXIE Number of Tickets: 4

Description of Organization: Public Television

Address of Organization: 1003 North Market Redding CA 96003
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
PROMOTION OF CITY FACILITIES

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

[Signature] JOHN JOHNSON GENERAL MANAGER 8/30/10
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

Tickets Provided by Agency Report

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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
CITY OF REDDING			
Division, Department, or Region (if applicable)			
CONVENTION CENTER			
Street Address			
700 AUDITORIUM DRIVE			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must explain in Part 5.)	
530-225-4124	jjohnson@ci.redding.ca.us	Date of Original Filing: _____ (month, day, year)	
Agency Contact (name and title)			
JOHN JOHNSON, GENERAL MANAGER			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 9, 10, 10 Description of Event: LeAnn Rimes Live

Face Value of Ticket: \$ 55⁰⁰ per ticket

Agency Event Yes No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Slowhand Entertainment

Number of Tickets Received: 2 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: MLK Center Number of Tickets: 2

Description of Organization: _____

Address of Organization: _____
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
PROMOTION OF CITY FACILITIES

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

[Signature] JOHN JOHNSON GENERAL MANAGER 9/2/10
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

Tickets Provided by Agency Report

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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802
CITY OF REDDING		RECEIVED CITY CLERKS OFFICE AUG 23 2010	For Official Use Only
Division, Department, or Region (if applicable)			
CONVENTION CENTER		BY: _____	
Street Address		<input type="checkbox"/> Amendment (Must explain in Part 5)	
700 AUDITORIUM DRIVE		Date of Original Filing: _____ (month, day, year)	
Area Code/Phone Number	E-mail		
530-225-4124	jjohnson@ci.redding.ca.us		
Agency Contact (name and title)			
JOHN JOHNSON, GENERAL MANAGER			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 9, 10, 2010 Description of Event: LeAnn Rimes Live

Face Value of Ticket: \$ 55.00 per ticket

Agency Event Yes No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Slowhand

Number of Tickets Received: 2 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: George Sell Number of Tickets: 2

Description of Organization: _____

Address of Organization: 1053 Edgewater Ct. Redding CA 96003
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
PROMOTION OF CITY FACILITIES

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

Signature of Agency Head or Designee: [Signature] Print Name: JOHN JOHNSON Title: GENERAL MANAGER Date: 8/20/10
(month/day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

Tickets Provided by Agency Report

A Public Document

TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802 RECEIVED CITY CLERKS OFFICE AUG 18 2010 BY: _____
CITY OF REDDING			
Division, Department, or Region (if applicable) CONVENTION CENTER			
Street Address 700 AUDITORIUM DRIVE			
Area Code/Phone Number 530-225-4124	E-mail jjohnson@ci.redding.ca.us	<input type="checkbox"/> Amendment (Must explain in Part 5) Date of Original Filing: _____ (month, day, year)	
Agency Contact (name and title) JOHN JOHNSON, GENERAL MANAGER			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 09, 10, 10 Description of Event: Le Ann Rimes
 _____ Face Value of Ticket: \$ \$55 per ticket \$110 Total

Agency Event Yes No (Identify source of tickets below.)
 Name of Outside Source of Ticket(s) Provided to Agency: Slow Hand Productions
 Number of Tickets Received: 2 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: Dell Turner Number of Tickets: 2

Description of Organization: Professional Photographer

Address of Organization: 3950 Pine Grove Ave Shasta Lake City CA 96019
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
PROMOTION OF CITY FACILITIES

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

Signature of Agency Head or Designee: [Signature] JOHN JOHNSON GENERAL MANAGER 8/16/10
Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

Tickets Provided by Agency Report

A Public Document

TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802
CITY OF REDDING		RECEIVED CITY CLERKS OFFICE AUG - 6 2010	For Official Use Only
Division, Department, or Region (if applicable)			
CONVENTION CENTER		BY: _____	
Street Address		<input type="checkbox"/> Amendment (Must explain in Part 5.)	
700 AUDITORIUM DRIVE		Date of Original Filing: _____ (month, day, year)	
Area Code/Phone Number	E-mail		
530-225-4124	jjohnson@ci.redding.ca.us		
Agency Contact (name and title)			
JOHN JOHNSON, GENERAL MANAGER			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 01/12/2011 Description of Event: Grease
02/03/2011 legally Blonde
02/27/2011 The Rat Pack is Back

Face Value of Ticket: \$ \$27.50 per ticket

Agency Event Yes No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Jam Theatricals

Number of Tickets Received: 6 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: Shasta Library Foundation Number of Tickets: 6

Description of Organization: _____

Address of Organization: PO Box 993366 Redding Ca 96099
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
PROMOTION OF CITY FACILITIES

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

[Signature] JOHN JOHNSON GENERAL MANAGER 8/05/10
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

Tickets Provided by Agency Report

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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name CITY OF REDDING Division, Department, or Region (if applicable) CONVENTION CENTER Street Address 700 AUDITORIUM DRIVE Area Code/Phone Number E-mail 530-225-4124 jjohnson@ci.redding.ca.us Agency Contact (name and title) JOHN JOHNSON, GENERAL MANAGER		Date Stamp RECEIVED CITY CLERKS OFFICE JUL 29 2010 BY: _____	California Form 802 For Official Use Only <input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)
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2. Event For Which Tickets Were Distributed

Date(s) of Event: 02, 03, 11 Description of Event: Legally Blonde
 _____ Face Value of Ticket: \$ 27.00 each

Agency Event Yes No (Identify source of tickets below.)
 Name of Outside Source of Ticket(s) Provided to Agency: Jam Theatricals
 Number of Tickets Received: 2 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON
 Name of Individual or Organization: Redding Chamber of Commerce Number of Tickets: 2
 Description of Organization: _____
 Address of Organization: 747 Auditorium Dr. Redding Ca 96001
Number and Street City State Zip Code
 Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
PROMOTION OF CITY FACILITIES

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

Signature of Agency Head or Designee: [Signature] JOHN JOHNSON GENERAL MANAGER 7/27/10
Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

Tickets Provided by Agency Report

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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp RECEIVED CITY CLERKS OFFICE JUL 29 2010	California Form 802 For Official Use Only
CITY OF REDDING Division, Department, or Region (if applicable) CONVENTION CENTER		BY: _____	
Street Address 700 AUDITORIUM DRIVE			
Area Code/Phone Number 530-225-4124	E-mail jjohnson@ci.redding.ca.us	<input type="checkbox"/> Amendment (Must explain in Part 5.)	
Agency Contact (name and title) JOHN JOHNSON, GENERAL MANAGER		Date of Original Filing: _____ (month, day, year)	

2. Event For Which Tickets Were Distributed

Date(s) of Event: 01/12/2011 Description of Event: Grease the Musical
 _____ Face Value of Ticket: \$ 27.50 each

Agency Event Yes No (Identify source of tickets below.)
 Name of Outside Source of Ticket(s) Provided to Agency: Jam Theatricals
 Number of Tickets Received: 2 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON
 Name of Individual or Organization: Bedding Chamber of Commerce Number of Tickets: 2
 Description of Organization: _____
 Address of Organization: 747 Auditorium Dr. Redding Ca 96001
Number and Street City State Zip Code
 Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
PROMOTION OF CITY FACILITIES

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

Signature of Agency Head or Designee: [Signature] JOHN JOHNSON GENERAL MANAGER 7/27/10
Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

Tickets Provided by Agency Report

A Public Document

TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
CITY OF REDDING		RECEIVED CITY CLERKS OFFICE JUL 29 2010	
Division, Department, or Region (if applicable)			
CONVENTION CENTER		BY: _____	
Street Address		<input type="checkbox"/> Amendment (Must explain in Part 5) Date of Original Filing: _____ <small>(month, day, year)</small>	
700 AUDITORIUM DRIVE			
Area Code/Phone Number	E-mail		
530-225-4124	jjohnson@ci.redding.ca.us		
Agency Contact (name and title)			
JOHN JOHNSON, GENERAL MANAGER			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 02/27/2011 Description of Event: The Rat Pack is Back

Face Value of Ticket: \$ \$104.00 or \$52.00 each

Agency Event Yes No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Jam Theatricals

Number of Tickets Received: 2 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: Cheryl Matthews Number of Tickets: 2

Description of Organization: _____

Address of Organization: 3933 Sun Wood Redding Ca 96002
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
PROMOTION OF CITY FACILITIES

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

Signature of Agency Head or Designee: [Signature] Print Name: JOHN JOHNSON Title: GENERAL MANAGER Date: 7/27/10
(month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

**Tickets Provided by
Agency Report**

A Public Document

TICKETS PROVIDED BY
AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
CITY OF REDDING		RECEIVED CITY CLERKS OFFICE JUL 29 2010	
Division, Department, or Region (if applicable)			BY:
CONVENTION CENTER		<input type="checkbox"/> Amendment (Must explain in Part 5)	
Street Address			Date of Original Filing: _____ (month, day, year)
700 AUDITORIUM DRIVE			
Area Code/Phone Number	E-mail		
530-225-4124	jjohnson@ci.redding.ca.us		
Agency Contact (name and title)			
JOHN JOHNSON, GENERAL MANAGER			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 10, 13, 2010 Description of Event: New Christy Minstrels
 _____ Face Value of Ticket: \$ \$35.00 each

Agency Event Yes No (Identify source of tickets below.)
 Name of Outside Source of Ticket(s) Provided to Agency: Shasta Community Concerts
 Number of Tickets Received: 2 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: Bedding Chamber of Commerce Number of Tickets: 2

Description of Organization: _____

Address of Organization: 747 Auditorium Dr. Redding Ca 96001
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
PROMOTION OF CITY FACILITIES

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

[Signature] JOHN JOHNSON GENERAL MANAGER 7/27/10
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

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A Public Document

TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name CITY OF REDDING		Date Stamp RECEIVED CITY CLERKS OFFICE JUL 14 2010	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) CONVENTION CENTER		BY: _____	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)
Street Address 700 AUDITORIUM DRIVE			
Area Code/Phone Number 530-225-4124	E-mail jjohnson@ci.redding.ca.us		
Agency Contact (name and title) JOHN JOHNSON, GENERAL MANAGER			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 08, 07, 10 Description of Event: George Lopez Live

Face Value of Ticket: \$ 47⁰⁰ each

Agency Event Yes No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Goldenvoice

Number of Tickets Received: 2 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: JOHN JOHNSON

Name of Individual or Organization: Gomez-Smith, Chris Number of Tickets: 2

Description of Organization: _____

Address of Organization: 1579 Dana Dr. Redding Ca 96003
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
PROMOTION OF CITY FACILITIES

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

Signature of Agency Head or Designee: [Signature] Print Name: JOHN JOHNSON Title: GENERAL MANAGER Date: 7/13/10
(month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)