Tickets Provided by
Agency Report

1. Agency Name
   COUNTY OF ALAMEDA
   Division, Department, or Region (if applicable)
   1221 OAK STREET, #555
   Street Address
   OAKLAND, CA 94612
   Area Code/Phone Number
   (510) 272-3882
   E-mail
   crystal.hishida@acgov.org
   Agency Contact (name and title)
   Crystal Hishida Graff, Principal Analyst, County Administrator’s Office

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 01 / 13 / 10
   Description of Event: Golden State Warriors vs. Miami Heat
   Face Value of Ticket: $ 95.00
   Agency Event
   □ Yes □ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   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)

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District
   Name of Individual or Organization: Pastor Brandon Rheems
   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.)
   To reward a community volunteer for his or her service to the public.

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
   CRISTAL HISHIDA GRAFF
   PRINCIPAL ANALYST
   (month, day, year)

   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
**Tickets Provided by Agency Report**

### 1. Agency Name
- **County of Alameda**
- **1221 Oak Street, #555**
- **Oakland, CA 94612**
- **Area Code/Phone Number**: (510) 272-3882
- **E-mail**: crystal.hishida@acgov.org
- **Agency Contact** (name and title): Crystal Hishida Graff, Principal Analyst, County Administrator's Office

### 2. Event For Which Tickets Were Distributed
- **Date(s) of Event:** 01/13/10
- **Description of Event:** Golden State Warriors vs. Miami Heat
- **Face Value of Ticket:** $95.00
- **Agency Event** □ Yes □ No (Identify source of tickets below.)
- **Name of Outside Source of Ticket(s) Provided to Agency:** Golden State Warriors
- **Number of Tickets Received:** 2
- **Ticket(s) Provided to Agency:** □ Gratuitously □ Pursuant to Contract

### 3. Agency Official(s) Receiving Ticket(s)

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carson, Keith</td>
<td>2</td>
<td>Obtain oversight of facilities</td>
</tr>
</tbody>
</table>

### 4. Individual or Organization Receiving Ticket(s)
- **Name of Behesting Agency Official:** Supervisor Keith Carson, District 5
- **Name of Individual or Organization**: ____________________________
- **Number of Tickets**: __________________
- **Description of Organization**: ____________________________
- **Address of Organization**: ____________________________
- **Purpose for Distribution**: (Describe the public purpose for the distribution to the organization.)

### 5. Verification
- **Signature of Agency Head or Designee**: __________________
- **Print Name**: CRYSTAL HISHIDA GRAFF
- **Title**: PRINCIPAL ANALYST
- **Date (Month, Day, Year)**: 01/10/10

---

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
1. **Agency Name**
   - COUNTY OF ALAMEDA
   - Division, Department, or Region (if applicable)
   - 1221 OAK STREET, #555
   - Street Address
   - OAKLAND, CA 94612
   - Area Code/Phone Number: (510) 272-3882
   - E-mail: crystal.hishida@acgov.org
   - Agency Contact (name and title): Crystal Hishida Graff, Principal Analyst, County Administrator's Office

2. **Event For Which Tickets Were Distributed**
   - Date(s) of Event: 01/13/10
   - Description of Event: Golden State Warriors vs. Miami Heat
   - Face Value of Ticket: $95.00
   - Agency Event: No

3. **Agency Official(s) Receiving Ticket(s)**
   - Number of Tickets Received: 2
   - Ticket(s) Provided to Agency: Pursuant to Contract

4. **Individual or Organization Receiving Ticket(s)**
   - Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District
   - Name of Individual or Organization: Minister Keith Muhammad
   - Number of Tickets: 2
   - Description of Organization:
   - Address of Organization: 
   - Number and Street: 
   - City: 
   - State: 
   - Zip Code: 
   - Purpose for Distribution: To reward a community volunteer for his or her service to the public.

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: 
   Print Name: CRYSTAL HISHIDA GRAFF
   Title: PRINCIPAL ANALYST
   Date: 1/10/10

   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by Agency Report

1. Agency Name
   COUNTY OF ALAMEDA

   Division, Department, or Region (if applicable)

   1221 OAK STREET, #555

   Street Address

   OAKLAND, CA 94612

   Area Code/Phone Number

   (510) 272-3882

   E-mail

   crystal.hishida@acgov.org

   Agency Contact (name and title)

   Crystal Hishida Graff, Principal Analyst, County Administrator's Office

   Date Stamp

   California Form 802

   For Official Use Only

2. Event For Which Tickets Were Distributed

   Date(s) of Event: 01 / 13 / 10

   Description of Event: Golden State Warriors vs. Miami Heat

   Face Value of Ticket: $ 95.00

   Agency Event

   □ Yes  □ No (Identify source of tickets below.)

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

   Golden State Warriors

   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: Keith Carson, Supervisor Fifth District

   Name of Individual or Organization: Bishop Keith Clark

   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.)

   To reward a community volunteer for his or her service to the public.

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

   CRYSTAL HISHIDA GRAFF

   Print Name

   PRINCIPAL ANALYST

   Title

   (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
1. Agency Name
COUNTY OF ALAMEDA

Division, Department, or Region (if applicable)
1221 OAK STREET, #555

Street Address
OAKLAND, CA 94612

Area Code/Phone Number E-mail
(510) 272-3882 crystal.hishida@acgov.org

Agency Contact (name and title)
Crystal Hishida Graff, Principal Analyst, County Administrator’s Office

2. Event For Which Tickets Were Distributed
Date(s) of Event: 01 / 29 / 10 Description of Event: Basketball Game
Face Value of Ticket: $ 9.5

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

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 1 Ticket(s) Provided to Agency: ☑ Gratuitously ☑ Pursuant to Contract

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

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
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<td></td>
</tr>
</tbody>
</table>

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: Vy Le
Number of Tickets: 1

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.)
to encourage staff development

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]
CRISTAL HISHIDA GRAFF
PRINCIPAL ANALYST

(Month, day, year)

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

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Tickets Provided by Agency Report

1. Agency Name
   COUNTY OF ALAMEDA

Division, Department, or Region (if applicable)
1221 OAK STREET, #555

Street Address
OAKLAND, CA 94612

Area Code/Phone Number
(510) 272-3882

E-mail
crystal.hishida@acgov.org

Agency Contact (name and title)
Crystal Hishida Graff, Principal Analyst, County Administrator's Office

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 01/29/10
   Description of Event: Basketball Game
  面 Value of Ticket: $95

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

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 1

Ticket(s) Provided to Agency:
☐ Gratuitously ☒ Pursuant to Contract

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

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<tr>
<th>Name of Official (Last, First)</th>
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</tbody>
</table>

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: Stacy Zhang

Number of Tickets: 1

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.)
to encourage staff development

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: CRYSTAL HISHIDA GRAFF
Print Name: PRINCIPAL ANALYST
Title:

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

FPPC Form 802 (Feb/09)
FPPC Toll-Free Hotline: 866/ASK-FPPC (866/275-3772)
### Tickets Provided by Agency Report

#### 1. Agency Name
- COUNTY OF ALAMEDA

**Division, Department, or Region (if applicable)**
- 1221 OAK STREET, #555

**Street Address**
- OAKLAND, CA. 94612

**Area Code/Phone Number**
- (510) 272-3882

**E-mail**
- crystal.hishida@acgov.org

**Agency Contact (name and title)**
- Crystal Hishida Graff, Principal Analyst, County Administrator’s Office

#### 2. Event For Which Tickets Were Distributed
- **Date(s) of Event:** 01/29/10
- **Description of Event:** Basketball Game
- **Face Value of Ticket:** $15

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

**Name of Outside Source of Ticket(s) Provided to Agency:** Golden State Warriors

**Number of Tickets Received:** 1

**Ticket(s) Provided to Agency:** □ Gratuitously  □ Pursuant to Contract

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

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
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<td></td>
</tr>
</tbody>
</table>

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

**Name of Behesting Agency Official:** Alameda County Supervisor Nate Miley, District 4

**Name of Individual or Organization:** Maria Tosco

**Number of Tickets:** 1

**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.)
- to encourage staff development

#### 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__

CRISTAL HISHIDA GRAFF

PRINCIPAL ANALYST

1/12/10  (Month, Day, Year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by
Agency Report

1. Agency Name
COUNTY OF ALAMEDA
Division, Department, or Region (if applicable)
1221 OAK STREET, #555
Street Address
OAKLAND, CA 94612
Area Code/Phone Number (510) 272-3882
E-mail crystal.hishida@acgov.org
Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator’s Office

Date Stamp
California Form 802
For Official Use Only

□ Amendment (Must explain in Part 5.)
Date of Original Filing: (month, day, year)

2. Event For Which Tickets Were Distributed
Date(s) of Event: 01/29/10 Description of Event: Basketball Game
Face Value of Ticket: $95
Agency Event □ Yes ☑ No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
Number of Tickets Received: 1 Ticket(s) Provided to Agency: □ Gratuitously ☑ Pursuant to Contract

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

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
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<tr>
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<td></td>
</tr>
</tbody>
</table>

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4
Name of Individual or Organization: Alejandro Garcia Number of Tickets: 1
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.) to encourage staff development

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 CRISTAL HISHIDA GRAFF PRINCIPAL ANALYST 11/2/10
(month, day, year)

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

FPPC Form 802 (Feb/09)
FPPC Toll-Free Hotpline: 866/ASK-FPPC (866/275-3772)
Tickets Provided by
Agency Report

A Public Document

1. Agency Name
   COUNTY OF ALAMEDA
   Division, Department, or Region (if applicable)
   1221 OAK STREET, #555
   Street Address
   OAKLAND, CA 94612
   Area Code/Phone Number: (510) 272-3882
   E-mail: crystal.hishida@acgov.org
   Agency Contact (name and title): Crystal Hishida Graff, Principal Analyst, County Administrator's Office

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 01/29/10
   Description of Event: Basketball Game
   Face Value of Ticket: $95
   Agency Event: No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 1
   Ticket(s) Provided to Agency: Pursuant to Contract

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

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
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<td></td>
</tr>
</tbody>
</table>

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

   Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4
   Name of Individual or Organization: Reynato Gloria
   Number of Tickets: 1
   Description of Organization:
   Address of Organization:
   Number and Street: city
   State: Zip Code
   Purpose for Distribution: To encourage staff development

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: CRYSTAL HISHIDA GRAFF
   Print Name: PRINCIPAL ANALYST
   Title: 01/12/10
   (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by Agency Report

1. **Agency Name**
   COUNTY OF ALAMEDA

Division, Department, or Region (if applicable)
1221 OAK STREET, #555

Street Address
OAKLAND, CA 94612

Area Code/Phone Number
(510) 272-3882

E-mail
crystal.hishida@acgov.org

Agency Contact (name and title)
Crystal Hishida Graff, Principal Analyst, County Administrator's Office

**Date Stamp**
California Form 802
For Official Use Only

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

2. **Event For Which Tickets Were Distributed**

   **Date(s) of Event:** 01/29/10

   **Description of Event:** Basketball Game

   **Face Value of Ticket:** $95.00

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

   **Name of Outside Source of Ticket(s) Provided to Agency:** Golden State Warriors

   **Number of Tickets Received:** 1

   **Ticket(s) Provided to Agency:** Gratuitously
   Pursuant to Contract

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

<table>
<thead>
<tr>
<th>Name of Official</th>
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<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
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</tbody>
</table>

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

   **Name of Behesting Agency Official:** Alameda County Supervisor Nate Miley, District 4

   **Name of Individual or Organization:** Douglas Bond

   **Number of Tickets:** 1

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

   **Purpose for Distribution:** (Describe the public purpose for the distribution to the organization.)
   to encourage staff development

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
   CRYSTAL HISHIDA GRAFF
   PRINCIPAL ANALYST
   Title
   (month, day, year)

   **Comment:** (Use this space or an attachment for any additional information including amendment explanation.)
# Tickets Provided by Agency Report

**Agency Name**
COUNTY OF ALAMEDA

**Division, Department, or Region (if applicable)**
1221 OAK STREET, #555

**Street Address**
OAKLAND, CA. 94612

**Area Code/Phone Number**
(510) 272-3882

**E-mail**
crystal.hishida@acgov.org

**Agency Contact (name and title)**
Crystal Hishida Graff, Principal Analyst, County Administrator's Office

---

## 2. Event For Which Tickets Were Distributed

**Date(s) of Event:** 01/29/10  
**Description of Event:** Basketball Game

**Face Value of Ticket:** $95

**Agency Event**
- ☒ Yes
- ☐ No (Identify source of tickets below.)

**Name of Outside Source of Ticket(s) Provided to Agency:** Golden State Warriors

**Number of Tickets Received:** 1  
**Ticket(s) Provided to Agency:** ☒ Pursuant to Contract

---

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

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
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</tr>
</tbody>
</table>

---

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

**Name of Behesting Agency Official:** Alameda County Supervisor Nate Miley, District 4

**Name of Individual or Organization:** Scot Allan

**Number of Tickets:** 1

**Description of Organization:**

**Address of Organization:**

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

to encourage staff development

---

## 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]

**Signature of Agency Head or Designee**

**Print Name**

**Title**

**Date**

---

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

---

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Tickets Provided by
Agency Report

1. Agency Name
   COUNTY OF ALAMEDA
   1221 OAK STREET, #555

Division, Department, or Region (if applicable)

Street Address
   OAKLAND, CA. 94612

Area Code/Phone Number
   (510) 272-3882
   crystal.hishida@acgov.org

Agency Contact (name and title)
   Crystal Hishida Graff, Principal Analyst, County Administrator’s Office

Date of Original Filing:

California Form 802
For Official Use Only

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 01 / 29 / 10
   Description of Event: Basketball Game
   Face Value of Ticket: $ 75.00

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

   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

   Number of Tickets Received: 1
   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: Alameda County Supervisor Nate Miley, District 4

   Name of Individual or Organization: Kevin Barbaro
   Number of Tickets: 1

   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.)
   ◐ to encourage staff development

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

   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**

**Agency Name**
COUNTY OF ALAMEDA

**Division, Department, or Region (if applicable)**
1221 OAK STREET, #555

**Street Address**
OAKLAND, CA. 94612

**Area Code/Phone Number**
(510) 272-3682

**E-mail**
crystal.hishida@acgov.org

**Agency Contact (name and title)**
Crystal Hishida Graff, Principal Analyst, County Administrator's Office

**Date of Original Filing:**

---

**2. Event For Which Tickets Were Distributed**

**Date(s) of Event:** 01/08/10

**Description of Event:** Basketball Game

**Face Value of Ticket:** $95

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

**Name of Outside Source of Ticket(s) Provided to Agency:**
Golden State Warriors

**Number of Tickets Received:**

---

**3. Agency Official(s) Receiving Ticket(s)**

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<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
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</table>

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

**Name of Behesting Agency Official:** Alameda County Supervisor Nate Miley, District 4

**Name of Individual or Organization:** Joe Rodgers

**Number of Tickets:**

---

**Description of Organization:**

---

**Address of Organization:**

---

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

---

**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:**

**Print Name:**

**Title:**

**Date:** 1/7/10

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

---

FPPC Form 802 (Feb/09)

FPPC Toll-Free Holpline: 866/ASK-FPPC (866/275-3772)
**Tickets Provided by Agency Report**

**1. Agency Name**
COUNTY OF ALAMEDA

**Division, Department, or Region (if applicable)**
1221 OAK STREET, #555

**Street Address**
OAKLAND, CA 94612

**Area Code/Phone Number** (510) 272-3882

**E-mail** crystal.hishida@acgov.org

**Agency Contact (name and title)**
Crystal Hishida Graff, Principal Analyst, County Administrator's Office

**Date Stamp**

**TICKETS PROVIDED BY AGENCY REPORT**

**California Form 802**
For Official Use Only

**Amendment** (Must explain in Part 5.)

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

**2. Event For Which Tickets Were Distributed**

**Date(s) of Event:** 01/08/10

**Description of Event:** Basketball Game

**Face Value of Ticket:** $95

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

**Name of Outside Source of Ticket(s) Provided to Agency:** Golden State Warriors

**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)**

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
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</tr>
</tbody>
</table>

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

**Name of Behesting Agency Official:** Alameda County Supervisor Nate Miley, District 4

**Name of Individual or Organization:** Angelina Rodriguez

**Number of Tickets:** 1

**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.)
volunteer contribution to community

**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** CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST

**Print Name**

**Title**

**Date:** 11/11/10 (month, day, year)

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

---

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Tickets Provided by
Agency Report

A Public Document

1. Agency Name
   COUNTY OF ALAMEDA
   Division, Department, or Region (if applicable)
   1221 OAK STREET, #555
   Street Address
   OAKLAND, CA 94612
   Area Code/Phone Number
   (510) 272-3882
   E-mail
   crystal.hishida@acgov.org
   Agency Contact (name and title)
   Crystal Hishida Graff, Principal Analyst, County Administrator's Office

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 02/10/10
   Description of Event: WARRIOR'S GAME
   Face Value of Ticket: $95.00
   Agency Event: Yes ☐ No ☒ (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: GOLDEN STATE WARRIORS
   Number of Tickets Received: 20
   Ticket(s) Provided to Agency: ☐ Gratuitously ☒ Pursuant to Contract

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

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
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</tbody>
</table>

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

   Name of Behesting Agency Official: ALAMEDA COUNTY SUPERVISOR SCOTT HAGGERTY, DISTRICT ONE
   Name of Individual or Organization: FOOTHILL HIGH SCHOOL
   Number of Tickets: 20
   Description of Organization: HIGH SCHOOL
   Address of Organization: 7908 FAIROAKS COURT
   PLEASANTON CA 94588
   Number and Street
   City
   State
   Zip Code
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   TO REWARD A SCHOOL/NONPROFIT ORGANIZATION FOR ITS CONTRIBUTIONS TO THE COMMUNITY/fundraiser

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]
CRYSTAL HISHIDA GRAFF
PRINCIPAL ANALYST

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by
Agency Report

1. Agency Name
   COUNTY OF ALAMEDA
   Division, Department, or Region (if applicable)
   1221 OAK STREET, #555
   Street Address
   OAKLAND, CA 94612
   Area Code/Phone Number (510) 272-3882
   E-mail crystal.hishida@acgov.org
   Agency Contact (name and title)
   Crystal Hishida Graff, Principal Analyst, County Administrator's Office

   Date Stamp
   California Form 802
   For Official Use Only

   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 / 27 / 10
   Description of Event: Golden State Warrior's game
   Face Value of Ticket: $ 95.00
   Agency Event ☐ Yes ☒ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 12
   Ticket(s) Provided to Agency: ☐ Gratuitously ☒ Pursuant to Contract

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

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
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<td></td>
</tr>
</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: ALAMEDA COUNTY SUPERVISOR SCOTT HAGGERTY - DISTRICT ONE
   Name of Individual or Organization: LIVERMORE HERITAGE GUILD
   Number of Tickets: 12
   Description of Organization: TO ENSURE AWARENESS AND PROTECTION OF LIVERMORES RICH HERITAGE
   Address of Organization: P.O. BOX 961 LIVERMORE CA 94551
   Purpose for Distribution: TO REWARD A SCHOOL OR NONPROFIT ORGANIZATION FOR ITS CONTRIBUTIONS TO THE COMMUNITY

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 CRISTAL HISHIDA GRAFF PRINCIPAL ANALYST
   (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

1. Agency Name
COUNTY OF ALAMEDA

Division, Department, or Region (if applicable)
1221 OAK STREET, #555

Street Address
OAKLAND, CA 94612

Area Code/Phone Number (name and title)
(510) 272-3882 crystal.hishida@acgov.org

Agency Contact
Crystal Hishida Graff, Principal Analyst, County Administrator's Office

Date Stamp
California Form
802
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2. Event For Which Tickets Were Distributed
Date(s) of Event: 2 / 27 / 10 Description of Event: Monster Jam

/ / Face Value of Ticket: $ 30.00

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

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

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

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

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scott Haggerly, Alameda Co. Supervisor, D-1</td>
<td>4</td>
<td>To review facilities or events that require County funding or support.</td>
</tr>
</tbody>
</table>

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

Name of Behesting Agency Official: Supervisor S. Haggerley, District 1

Name of Individual or Organization: ____________________________ Number of Tickets: ______

Description of Organization: ____________________________

Address of Organization: ____________________________

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

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

CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST

Print Name Title

(1/27/10) (month, day, year)

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

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Tickets Provided by Agency Report  
A Public Document  

1. Agency Name  
COUNTY OF ALAMEDA  
Division, Department, or Region (If applicable)  
1221 OAK STREET, #555  
Street Address  
OAKLAND, CA 94612  
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(510) 272-3882  
E-mail  
crystal.hishida@acgov.org  
Agency Contact (name and title)  
Crystal Hishida Graff, Principal Analyst, County Administrator's Office  

Date Stamp  
California Form 802  
For Official Use Only  
Amendment (Must explain in Part 5.)  
Date of Original Filing: (Month, day, year)  

2. Event For Which Tickets Were Distributed  
Date(s) of Event: 02/13/10  
Description of Event: BILLY JOEL/ELTON JOHN  
Face Value of Ticket: $  
Agency Event  
☐ Yes  ☒ No (Identify source of tickets below.)  
Name of Outside Source of Ticket(s) Provided to Agency: GOLDEN STATE WARRIORS  
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)  
<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>ALAMEDA COUNTY SUPERVISOR</td>
<td></td>
<td>TO REVIEW FACILITIES OR EVENTS THAT REQUIRE</td>
</tr>
<tr>
<td>SCOTT HAGGERTY DISTRICT 1</td>
<td>4</td>
<td>COUNTY FUNDING OR SUPPORT</td>
</tr>
</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)  
Name of Behesting Agency Official:  
Supervisor S. Haggerty, District 1  
Name of Individual or Organization:  
Number of Tickets:  
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.)  

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  
CRystal Hishida Graff  
PRINCIPAL ANALYST  
Date (Month, Day, Year)  

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
## Tickets Provided by Agency Report

### 1. Agency Name
COUNTY OF ALAMEDA

Division, Department, or Region (if applicable)
1221 OAK STREET, #555

Street Address
OAKLAND, CA 94612

Area Code/Phone Number E-mail
(510) 272-3882 crystal.hishida@acgov.org

Agency Contact (name and title)
Crystal Hishida Graff, Principal Analyst, County Administrator's Office

Date Stamp
California Form 802
For Official Use Only

### 2. Event For Which Tickets Were Distributed

Date(s) of Event: 02/10/10

Description of Event: WARRIOR'S GAME

Face Value of Ticket: $ 95.00

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

Name of Outside Source of Ticket(s) Provided to Agency: GOLDEN STATE WARRIORS

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

### 3. Agency Official(s) Receiving Ticket(s)

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
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### 4. Individual or Organization Receiving Ticket(s)

(Provided at the behest of an agency official.)

Name of Behesting Agency Official: ALAMEDA COUNTY SUPERVISOR SCOTT HAGGERTY-DIST. 1

Name of Individual or Organization: SOROPTIMIST INTERNATIONAL

Number of Tickets: 4

Description of Organization: SOROPTIMIST INTERNATIONAL OF PLEASANTON/DUBLIN

Address of Organization: P.O. BOX 51 PLEASANTON CA 94566

Number and Street: City: State: Zip Code:

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

TO REWARD A SCHOOL OR NONPROFIT ORGANIZATION FOR ITS CONTRIBUTIONS TO THE COMMUNITY

### 5. Verification

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

CRYSTAL HISHIDA GRAFF  PRINCIPAL ANALYST  1/22/10

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.)

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Tickets Provided by Agency Report

A Public Document

1. Agency Name
COUNTY OF ALAMEDA

Division, Department, or Region (If applicable)
1221 OAK STREET, #555

Street Address
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Area Code/Phone Number E-mail
(510) 272-3882 crystal.hishida@acgov.org

Agency Contact (Name and title)
Crystal Hishida Graff, Principal Analyst, County Administrator's Office

Date of Original Filing: (Month, Day, Year)

2. Event For Which Tickets Were Distributed
Date(s) of Event: 02 / 17 / 10 Description of Event: Basketball Game
Face Value of Ticket: $95.00

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

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 1 Ticket(s) Provided to Agency:
☐ Gratuitously ☒ Pursuant to Contract

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

<table>
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<tr>
<th>Name of Official (Last, First)</th>
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4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: Amish Patel

Number of Tickets: 1

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.)

volunteer contribution to community

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 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 1/22/10

Print Name Title (Month, Day, Year)

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

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
**Tickets Provided by**
**Agency Report**

**1. Agency Name**
COUNTY OF ALAMEDA

**Division, Department, or Region (if applicable)**
1221 OAK STREET, #555

**Street Address**
OAKLAND, CA 94612

**Area Code/Phone Number**
(510) 272-3882

**E-mail**
crystal.hishida@acgov.org

**Agency Contact (name and title)**
Crystal Hishida Graff, Principal Analyst, County Administrator’s Office

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 02 / 17 / 10

Description of Event: Basketball Game

Face Value of Ticket: $95.00

Agency Event: ☑ No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 4

Ticket(s) Provided to Agency: ☑ Pursuant to Contract

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

<table>
<thead>
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</table>

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: Camps In Common

Number of Tickets: 4

Description of Organization: provides camp scholarships for oakland youth

Address of Organization: 462 Elwood Avenue Oakland, CA 94610

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

**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: Crystal Hishida Graff

Print Name: PRINCIPAL ANALYST

Title: 1/22/10 (month, day, year)

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

---

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
**Tickets Provided by Agency Report**

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**Street Address**
OAKLAND, CA. 94612

**Area Code/Phone Number**
(510) 272-3882

**E-mail**
crystal.hishida@acgov.org

**Agency Contact (name and title)**
Crystal Hishida Graff, Principal Analyst, County Administrator's Office

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

**2. Event For Which Tickets Were Distributed**

- **Date(s) of Event:** 02/17/10
- **Description of Event:** Basketball Game
- **Face Value of Ticket:** $95.00

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

**Name of Outside Source of Ticket(s) Provided to Agency:** Golden State Warriors

**Number of Tickets Received:** 1

**Ticket(s) Provided to Agency:**
- Gratuitously
- Pursuant to Contract

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

<table>
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<tr>
<th>Name of Official (Last, First)</th>
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**4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)**

- **Name of Behesting Agency Official:** Alameda County Supervisor Nate Miley, District 4

- **Name of Individual or Organization:** Saeng Saephun

- **Number of Tickets:** 1

- **Description of Organization:**

- **Address of Organization:**

- **Purpose for Distribution:** (Describe the public purpose for the distribution to the organization.)
- Volunteer contribution to community

**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/Hub of Designee**

**CRRYSTAL HISHIDA GRAFF**

**PRINCIPAL ANALYST**

(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

1. Agency Name
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Division, Department, or Region (If applicable)
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E-mail crystal.hishida@acgov.org
Agency Contact (name and title)
Crystal Hishida Graff, Principal Analyst, County Administrator's Office

2. Event For Which Tickets Were Distributed
Date(s) of Event: 01/08/10 Description of Event: Basketball Game
Face Value of Ticket: $95
Agency Event Yes ☐ No ☑ (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
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)

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
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4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4
Name of Individual or Organization: Jim Kennedy Number of Tickets: 2
Description of Organization: volunteer contribution to community
Address of Organization: ☐ Number and Street ☐ City ☐ State ☐ Zip Code
Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
volunteer contribution to community

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

Signed: ___________________________ CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST
Signature of Agency Head or Designee Print Name Title Date
Comment: (Use this space or an attachment for any additional information including amendment explanation.)
volunteer contribution to community

FPPC Form 802 (Feb/09)
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Tickets Provided by
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   Agency Contact (name and title)
   Crystal Hishida Graff, Principal Analyst, County Administrator’s Office

   Date Stamp
   California Form 802
   For Official Use Only

   Amendment (Must explain in Part 5.)
   □ Yes  □ No (Identify source of tickets below.)

   Date of Original Filing: 01/06/2010
   (month, day, year)

2. Event For Which Tickets Were Distributed

   Date(s) of Event: 01/16/10
   Description of Event: Harlem Globetrotters
   Face Value of Ticket: $33.00

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

   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

   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

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

   Name of Behesting Agency Official: Supervisor Alice Lai-Bitker, District 3

   Name of Individual or Organization: Mei-Ling Bitker
   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.)
   To promote attendance at an event held at a County facility in order to maximize County revenue from concession sales

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  CRYSTAL HISHIDA GRAFF  PRINCIPAL ANALYST

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

   (month, day, year)
Tickets Provided by Agency Report

1. Agency Name
   COUNTY OF ALAMEDA
   1221 OAK STREET, #555
   OAKLAND, CA. 94612
   Area Code/Phone Number (510) 272-3882
   E-mail crystal.hishida@acgov.org
   Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 01 / 08 / 10
   Description of Event: Basketball Game
   Face Value of Ticket: $ 9.5
   Agency Event: ☐ Yes ☑ No
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 1
   Ticket(s) Provided to Agency: ☐ Gratuitously ☑ Pursuant to Contract

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

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
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</tr>
</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4
   Name of Individual or Organization: Chris Miley
   Number of Tickets: 1
   Description of Organization: (Describe the public purpose for the distribution to the organization.)
   Address of Organization: (Number and Street, City, State, Zip Code)
   Purpose for Distribution: Volunteer contribution to community

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: CRYSTAL HISHIDA GRAFF
   Title: PRINCIPAL ANALYST
   Date (month, day, year): 11/30
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
   Volunteer contribution to community
**Tickets Provided by Agency Report**

**Agency Name**
COUNTY OF ALAMEDA

**Division, Department, or Region** (if applicable)
1221 OAK STREET, #555

**Street Address**
OAKLAND, CA 94612

**Area Code/Phone Number**
510-272-3882

**E-mail**
crystal.hishida@acgov.org

**Agency Contact** (name and title)
Crystal Hishida Graff, Principal Analyst, County Administrator's Office

**Date Stamp**

**California Form** 802

**For Official Use Only**

**Amendment** (Must explain in Part 5.)

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

---

**2. Event For Which Tickets Were Distributed**

**Date(s) of Event:** 1/23/10

**Description of Event:** Eddie Izzard

**Face Value of Ticket:** $79

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

**Name of Outside Source of Ticket(s) Provided to Agency:** Golden State Warriors

**Number of Tickets Received:** 12

**Ticket(s) Provided to Agency:**
- Gratuitously
- Pursuant to Contract

---

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

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
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</tbody>
</table>

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

**Name of Behesting Agency Official:** Supervisor Gail Steele, District 2

**Name of Individual or Organization:** Eden Youth & Family Center

**Number of Tickets:** 12

**Address of Organization:**
680 W. Tennyson Road
Hayward, CA 94144

**Description of Organization:** Provides multi-services to disadvantaged youth and families from Hayward environs

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

- to reward a non-profit for its contributions to the community

---

**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**

**CRystal HISHIDA GRAFF**
Print Name

**PRINCIPAL ANALYST**
Title

**Date:** (month, day, year)

**Comment:** (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by
Agency Report

1. Agency Name
   COUNTY OF ALAMEDA
   Division, Department, or Region (if applicable)

   Street Address
   1221 OAK STREET, #555, OAKLAND, CA 94612

   Area Code/Phone Number
   (510) 272-3882
crystal.hishida@acgov.org

   Agency Contact (name and title)
   Crystal Hishida Graff, Principal Analyst, County Administrator's Office

   Date Stamp
   California Form 802
   For Official Use Only
   Amendment (Must explain in Part 5.)
   Date of Original Filing: 01/08/2010

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 01/20/10
   Description of Event: Golden State Warriors Game
   Face Value of Ticket: $95.00
   Agency Event
   Yes  No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 4
   Ticket(s) Provided to Agency:  No Gratuitously  Yes 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: Supervisor Alice Lai-Bitker, District 3
   Name of Individual or Organization: Russ Underwood  Number of Tickets: 4
   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.)
   To promote attendance at an event held at a County facility in order to maximize County revenue from concession sales

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
   Print Name: CRYSTAL HISHIDA GRAFF
   Title: PRINCIPAL ANALYST
   Date: 01/08/2010
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
1. **Agency Name**
   
   COUNTY OF ALAMEDA

   **Division, Department, or Region (if applicable)**

   **Street Address**
   
   1221 OAK STREET, #555, OAKLAND, CA 94612

   **Area Code/Phone Number**
   (510) 272-3882

   **E-mail**
   crystal.hishida@acgov.org

   **Agency Contact (name and title)**
   Crystal Hishida Graff, Principal Analyst, County Administrator's Office

2. **Event For Which Tickets Were Distributed**

   **Date(s) of Event:** 01/06/10

   **Description of Event:** Harlem Globetrotters

   **Face Value of Ticket:** $33.00

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

   **Name of Outside Source of Ticket(s) Provided to Agency:** Golden State Warriors

   **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)**

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
</table>

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

   **Name of Behesting Agency Official:** Supervisor Alice Lai-Bitker, District 3

   **Name of Individual or Organization:** Barbara Teixeira

   **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.)

   To promote attendance at an event held at a County facility in order to maximize County revenue from concession sales

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
   
   CRYSTAL HISHIDA GRAFF
   
   PRINCIPAL ANALYST

   Date: 01/06/10

   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
1. Agency Name
COUNTY OF ALAMEDA
Division, Department, or Region (If applicable)
1221 OAK STREET, #555
Street Address
OAKLAND, CA 94612
Area Code/Phone Number (510) 272-3882
E-mail crystal.hishida@acgov.org
Agency Contact (Name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office

Date Stamp

California Form 802
For Official Use Only

□ Amendment (Must explain in Part 5.)
Date of Original Filing: (month, day, year)

2. Event For Which Tickets Were Distributed
Date(s) of Event: 01/08/10 Description of Event: Basketball Game
Face Value of Ticket: $95
Agency Event □ Yes ☒ No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
Number of Tickets Received: 1 Ticket(s) Provided to Agency: ☒ Gratuitously □ Pursuant to Contract

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

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
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</tbody>
</table>

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4
Name of Individual or Organization: Jim Kennedy
Number of Tickets: 1
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.) Volunteer contribution to community

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: CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST
Print Name Title
(month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.) Volunteer contribution to community
1. **Agency Name**
   - COUNTY OF ALAMEDA

   **Division, Department, or Region (if applicable)**
   - 1221 OAK STREET, #555

   **Street Address**
   - OAKLAND, CA 94612

   **Area Code/Phone Number**
   - (510) 272-3882

   **E-mail**
   - crystal.hishida@acgov.org

   **Agency Contact (name and title)**
   - Crystal Hishida Graff, Principal Analyst, County Administrator's Office

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

2. **Event For Which Tickets Were Distributed**
   - **Date(s) of Event:** 01/08/10
   - **Description of Event:** Basketball Game
   - **Face Value of Ticket:** $75

   **Agency Event**
   - ☑ No (Identify source of tickets below.)

   **Name of Outside Source of Ticket(s) Provided to Agency:** Golden State Warriors

   **Number of Tickets Received:** 1

   **Ticket(s) Provided to Agency:** ☑ Gratuitously ☑ Pursuant to Contract

3. **Agency Official(s) Receiving Ticket(s)**

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
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</tbody>
</table>

4. **Individual or Organization Receiving Ticket(s)**

   **Name of Behesting Agency Official:** Alameda County Supervisor Nate Miley, District 4

   **Name of Individual or Organization:** Alan Dones

   **Number of Tickets:** 1

   **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.)
   - Volunteer contribution to community

5. **Verification**

   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18044.1.

   **Signature of Agency Head or Designee:**
   - CRYSTAL HISHIDA GRAFF

   **Print Name:** PRINCIPAL ANALYST

   **Title:** (month, day, year)

   **Comment:** (Use this space or an attachment for any additional information including amendment explanation.)
   - Volunteer contribution to community

---

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Tickets Provided by
Agency Report

A Public Document

1. Agency Name
   COUNTY OF ALAMEDA
   Division, Department, or Region (if applicable)
   1221 OAK STREET, #555
   Street Address
   OAKLAND, CA 94612
   Area Code/Phone Number
   (510) 272-3882
   E-mail
   crystal.hishida@acgov.org
   Agency Contact (name and title)
   Crystal Hishida Graff, Principal Analyst, County Administrator's Office

Date Stamp

California Form 802
For Official Use Only

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 01/08/10
   Description of Event: Basketball Game
   Face Value of Ticket: $95
   Agency Event
   □ Yes  ☑ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency:
   Golden State Warriors
   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)

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Darryl Stewart</td>
<td>2</td>
<td>Oversee facility</td>
</tr>
</tbody>
</table>

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

   Name of Behesting Agency Official:
   Alameda County Supervisor Nate Miley, District 4
   Name of Individual or Organization:
   Number of Tickets:
   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.)

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

CRISTAL HISHIDA GRAFF  PRINCIPAL ANALYST

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

1. Agency Name
   COUNTY OF ALAMEDA

Division, Department, or Region (if applicable)
   1221 OAK STREET, #555

Street Address
   OAKLAND, CA 94612

Area Code/Phone Number  E-mail
   (510) 272-3882   crystal.hishida@acgov.org

Agency Contact (name and title)
   Crystal Hishida Graff, Principal Analyst, County Administrator's Office

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 02/27/10
   Description of Event: Monster Jam
   ___/___/___  Face Value of Ticket: $20.00

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

   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

   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  Number of Tickets  State Whether the Distribution is Income to the Official or
   (Last, First)                      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: Alameda County Supervisor Nate Miley, District 4

   Name of Individual or Organization: Robert & Kristine Coffelt
   Number of Tickets: 5

   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.)
   Volunteer contribution to community

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 Mater Designee
   CRISTAL HISHIDA GRAFF  PRINCIPAL ANALYST
   (month, day, year)

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

3-GS, 2NM

FPPC Form 802 (Feb/09)
FPPC Toll-Free Hotline: 866/ASK-FPPC (866/275-3772)
Tickets Provided by Agency Report

1. Agency Name
   COUNTY OF ALAMEDA
   1221 OAK STREET, #555
   OAKLAND, CA. 94612
   Area Code/Phone Number: (510) 272-3882
   E-mail: crystal.hishida@acgov.org
   Agency Contact (name and title): Crystal Hishida Graff, Principal Analyst, County Administrator's Office

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 02/27/10
   Description of Event: Monster Jam
   Face Value of Ticket: $70.00
   Agency Event: No
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 8
   Ticket(s) Provided to Agency: Pursuant to Contract

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

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
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</table>

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

   Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4
   Name of Individual or Organization: Danny Chu
   Number of Tickets: 2
   Description of Organization:
   Address of Organization: 
   Number and Street: ____________________________
   City: ____________________________
   State: ____________________________
   Zip Code: ____________________________
   Purpose for Distribution: Volunteer contribution to community

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] CRISTAL HISHIDA GRAFF PRINCIPAL ANALYST
   [Print Name] [Title] [Date (month/day/year)]

   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
# Tickets Provided by Agency Report

**Agency Name:** COUNTY OF ALAMEDA  
**Division, Department, or Region (if applicable):**  
1221 OAK STREET, #555  
**Street Address:** OAKLAND, CA 94612  
**Area Code/Phone Number:** 510-272-3882  
**E-mail:** crystal.hishida@acgov.org  
**Agency Contact (name and title):** Crystal Hishida Graff, Principal Analyst, County Administrator’s Office

## 2. Event For Which Tickets Were Distributed

- **Date(s) of Event:** 03 / 22 / 10  
- **Description of Event:** Warriors v. Suns  
- **Face Value of Ticket:** $95  

**Agency Event:** Yes  
**No (Identify source of tickets below):**

**Name of Outside Source of Ticket(s) Provided to Agency:** Golden State Warriors

**Number of Tickets Received:** 2  
**Ticket(s) Provided to Agency:**  
- **Gratuitously:** No  
- **Pursuant to Contract:** Yes

## 3. Agency Official(s) Receiving Ticket(s)

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
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</tbody>
</table>

## 4. Individual or Organization Receiving Ticket(s)

**Name of Behesting Agency Official:** Supervisor Gail Steele  
**District:** 2

**Name of Individual or Organization:** Lighthouse Community Center  
**Number of Tickets:** 2

**Description of Organization:** Serves LGBTQ community and allies in Southern Alameda County

**Address of Organization:**  
- **1217 A Street**  
- **Hayward, CA 94541**

**Purpose for Distribution:** (Describe the public purpose for the distribution to the organization.)  
To promote health, motivate and provide expanded opportunities to vulnerable populations in the County

## 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/Designee:**  
**Print Name:** CRYSTAL HISHIDA GRAFF  
**Title:** PRINCIPAL ANALYST  
**Date:** 11/9/10

**Comment:** (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by Agency Report

A Public Document

1. Agency Name
COUNTY OF ALAMEDA
Division, Department, or Region (if applicable)
1221 OAK STREET, #555
Street Address
OAKLAND, CA 94612
Area Code/Phone Number
510-272-3882
crystal.hishida@acgov.org
Agency Contact (name and title)
Crystal Hishida Graff, Principal Analyst, County Administrator's Office

Date Stamp
California Form 802
For Official Use Only

2. Event For Which Tickets Were Distributed
Date(s) of Event: 03 / 22 / 10
Description of Event: Warriors v. Suns
Face Value of Ticket: $95

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

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

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

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

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
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</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
Name of Behesting Agency Official: Supervisor Gail Steele 2nd District

Name of Individual or Organization: Sunol Business Guild
Number of Tickets: 4

Description of Organization: promotes economic opportunities in the Sunol environs of Alameda County

Address of Organization: P.O. Box 94
Sunol
CA 94586

Purpose for Distribution: Community contribution

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

CRystal HISHIDA GRAFF
Print Name
PRINCIPAL ANALYST
Title

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

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/276-3772)
Tickets Provided by Agency Report

1. Agency Name
   COUNTY OF ALAMEDA
   1221 OAK STREET, #555
   OAKLAND, CA 94612

   Area Code/Phone Number: (510) 272-3882
   E-mail: crystal.hishida@acgov.org
   Agency Contact: Crystal Hishida Graff, Principal Analyst, County Administrator's Office

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 02/17/10
   Description of Event: Basketball Game
   Face Value of Ticket: $9.50
   Agency Event: ☐ Yes ☑ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 1
   Ticket(s) Provided to Agency: ☑ 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: Alameda County Supervisor Nate Miley, District 4
   Name of Individual or Organization: Stanford Ma
   Number of Tickets: 1
   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.)
   volunteer contribution to community

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: ____________________________
   Print Name: CRYSTAL HISHIDA GRAFF
   Title: PRINCIPAL ANALYST
   Date: 1/12/10 (month, day, year)

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

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
1. **Agency Name**
   
   COUNTY OF ALAMEDA

   Division, Department, or Region (if applicable)

   1221 OAK STREET, #555

   Street Address

   OAKLAND, CA 94612

   Area Code/Phone Number

   E-mail

   (510) 272-3882
crystal.hishida@acgov.org

   **Agency Contact (name and title)**

   Crystal Hishida Graff, Principal Analyst, County Administrator's Office

2. **Event For Which Tickets Were Distributed**

   Date(s) of Event: **02/17/10**

   Description of Event: Basketball Game

   Face Value of Ticket: $15.00

   **Agency Event**

   ☑️ Yes  ☐ No (Identify source of tickets below.)

   Name of Outside Source of Ticket(s) Provided to Agency: **Golden State Warriors**

   Number of Tickets Received: **1**

   Ticket(s) Provided to Agency: ☑️ Gratuitously  ☐ Pursuant to Contract

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

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
</tr>
</thead>
<tbody>
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</tbody>
</table>

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

   **Name of Behesting Agency Official:**
   
   Alameda County Supervisor Nate Miley, District 4

   **Name of Individual or Organization:**

   Milton Ma

   Number of Tickets: **1**

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**

   **Print Name**

   **Title**

   **Date**

   (month, day, year)

   **Comment:** (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by Agency Report

1. Agency Name
   COUNTY OF ALAMEDA
   1221 OAK STREET, #555
   OAKLAND, CA 94612
   (510) 272-3882
   Crystal Hishida Graff, Principal Analyst, County Administrator's Office

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 01 / 29 / 10
   Description of Event: Basketball Game
   Face Value of Ticket: $95
   Agency Event: □ Yes ☑ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 10
   Ticket(s) Provided to Agency: □ Gratuitously ☑ Pursuant to Contract

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

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
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4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4
   Name of Individual or Organization: United Seniors of Oakland & Alameda County
   Number of Tickets: 10
   Description of Organization: Senior Advocacy
   Address of Organization: 7200 Bancroft Avenue, Suite 178, Oakland, CA 94605
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   Volunteer contribution to community

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: CRYSTAL HISHIDA GRAFF
   Title: PRINCIPAL ANALYST
   Date: 1/2/10

   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by Agency Report

1. Agency Name
   COUNTY OF ALAMEDA

Division, Department, or Region (if applicable)
   1221 OAK STREET, #555

Street Address
   OAKLAND, CA 94612

Area Code/Phone Number E-mail
   (510) 272-3882 crystal.hishida@acgov.org

Agency Contact (name and title)
   Crystal Hishida Graff, Principal Analyst, County Administrator's Office

Date Stamp

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 01/16/10
   Description of Event: Harlem Globetrotters
   Face Value of Ticket: $33

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

Name of Outside Source of Ticket(s) Provided to Agency:
   Golden State Warriors

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

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

<table>
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<tr>
<th>Name of Official</th>
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4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

   Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

   Name of Individual or Organization: Marvin and Linda Tangren
   Number of Tickets: 4

   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.)
   family's contribution to community

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
   CRYSTAL HISHIDA GRAFF
   PRINCIPAL ANALYST
   1/2/09
   (month, day, year)

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

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
2. Event For Which Tickets Were Distributed

Date(s) of Event: 01/16/10
Description of Event: Harlem Globetrotters
Face Value of Ticket: $33

Agency Event □ Yes □ No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
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)

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: David & Michelle Haubert
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.)

volunteer contribution to community

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: CRYSTAL HISHIDA GRAFF
Title: PRINCIPAL ANALYST
Date: 1/12/10

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
## Tickets Provided by Agency Report

### 1. Agency Name
COUNTY OF ALAMEDA

**Division, Department, or Region (if applicable):**
1221 OAK STREET, #555

**Street Address:**
OAKLAND, CA. 94612

**Area Code/Phone Number:** (510) 272-3882
**E-mail:** crystal.hishida@acgov.org

**Agency Contact (name and title):**
Crystal Hishida Graff, Principal Analyst, County Administrator’s Office

### 2. Event For Which Tickets Were Distributed

**Date(s) of Event:** 01/16/10
**Description of Event:** Harlem Globetrotters

**Face Value of Ticket:** $33

**Agency Event:** ☑ Yes

**Name of Outside Source of Ticket(s) Provided to Agency:** Golden State Warriors

**Number of Tickets Received:** 2

**Ticket(s) Provided to Agency:** ☑ Gratuitously ☑ Pursuant to Contract

### 3. Agency Official(s) Receiving Ticket(s)

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### 4. Individual or Organization Receiving Ticket(s)

**Name of Behesting Agency Official:** Alameda County Supervisor Nate Miley, District 4

**Name of Individual or Organization:** Karissa & Courtney Haubert

**Number of Tickets:** 2

**Description of Organization:**

**Address of Organization:**

<table>
<thead>
<tr>
<th>Number and Street</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
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</table>

**Purpose for Distribution:** (Describe the public purpose for the distribution to the organization.)
outstanding academic achievement

### 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:**

**Print Name:** CRYSTAL HISHIDA GRAFF

**Title:** PRINCIPAL ANALYST

**(Month, Day, Year):** 1/2/10

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

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FPPC Form 802 (Feb/09)
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