# 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:** 02/27/10

**Description of Event:** Golden State Warriors vs. Detroit Pistons

**Face Value of Ticket:** $95.00

**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:** 2

**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 (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>To obtain oversight of County facilities or events</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 Keith Carron, 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

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)**

**Comment:** (Use this space or an attachment for any additional information including amendment explanation.)
<table>
<thead>
<tr>
<th>Agency Name</th>
<th>COUNTY OF ALAMEDA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Division, Department, or Region (if applicable)</td>
<td>1221 OAK STREET, #555</td>
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<tr>
<td>Street Address</td>
<td>OAKLAND, CA 94612</td>
</tr>
<tr>
<td>Area Code/Phone Number</td>
<td>(510) 272-3882</td>
</tr>
<tr>
<td>E-mail</td>
<td><a href="mailto:crystal.hishida@acgov.org">crystal.hishida@acgov.org</a></td>
</tr>
<tr>
<td>Agency Contact (name and title)</td>
<td>Crystal Hishida Graff, Principal Analyst, County Administrator's Office</td>
</tr>
<tr>
<td>Date Stamp</td>
<td>California Form 802</td>
</tr>
<tr>
<td>Amendment (Must explain in Part 5.)</td>
<td></td>
</tr>
<tr>
<td>Date of Original Filing:</td>
<td>(month, day, year)</td>
</tr>
</tbody>
</table>

2. Event For Which Tickets Were Distributed

| Date(s) of Event: | 02 / 27 / 10 |
| Description of Event: | Golden State Warriors vs. Detroit Pistons |
| 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:
- Yes
- No (Identify above.)

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></td>
<td></td>
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<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Name of Behesting Agency Official:</th>
<th>Keith Carson, Supervisor Fifth District</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Individual or Organization:</td>
<td>Daniel Lyons</td>
</tr>
<tr>
<td>Number of Tickets:</td>
<td>2</td>
</tr>
</tbody>
</table>

Description of Organization:

Address of Organization:

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

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

To promote attendance at a County facility in order to maximize potential County revenue from parking and concession

5. Verification

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

CRISTAL HISHIDA GRAFF  PRINCIPAL ANALYST  2/05/10

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
1. **Agency Name**
   COUNTY OF ALAMEDA
   1221 OAK STREET, #555
   OAKLAND, CA 94612
   **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 / 27 / 10
   **Description of Event:** Golden State Warriors vs. Detroit Pistons
   **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</th>
<th>Number of Tickets</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<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:** Keith Carson, Supervisor Fifth District
   **Name of Individual or Organization:** Isetta Rodgers
   **Number of Tickets:** 2

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:** 02/25/10
   **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
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   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: 02/27/10
   Description of Event: Golden State Warriors vs. Detroit Pistons
   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: Melvin Scott
   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 a County facility in order to maximize potential County revenue from parking and concession

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.)
Tickets Provided by
Agency Report

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

   Date Stamp
   California Form 802

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 02/27/10
   Description of Event: Golden State Warriors vs. Detroit Pistons
   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>
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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: Keith Carson, Supervisor Fifth District
   Name of Individual or Organization: Robert Benjamin
   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 a County facility in order to maximize potential County revenue from parking and concession

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 (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
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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: Golden State Warriors vs. Detroit Pistons
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:

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>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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: Sylvester Brooks
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 a County facility in order to maximize potential County revenue from parking and concession

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
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 (866/275-3772)
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## 1. Agency Name
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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

## 2. Event For Which Tickets Were Distributed

### Date(s) of Event: 02/27/10

### Description of Event: Golden State Warriors vs. Oklahoma City Thunder

### Face Value of Ticket: $95.00

### 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: 2

## 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>
<tr>
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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: Keith Carson, Supervisor Fifth District

### Name of Individual or Organization: Terrell MacKinney

### Number of Tickets: 2

### Description of Organization:

### Address of Organization:

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

To promote attendance at a County facility in order to maximize potential County revenue from parking and concession

## 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:** 2/25/10 (month, day, year)

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

---

FPPC Form 802 (Feb/09)
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## Tickets Provided by Agency Report

### 1. Agency Name
- **COUNTY OF ALAMEDA**
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- **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 / 27 / 10
- **Description of Event:** Golden State Warriors vs. Detroit Pistons
- **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:** 2
- **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>
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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:** Keith Carson, Supervisor Fifth District
- **Name of Individual or Organization:** Vallerie Seals
- **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 a County facility in order to maximize potential County revenue from parking and concession

### 5. Verification
- **Signature of Agency Head or Designee:**
- **Print Name:** CRYSTAL HISHIDA GRAFF
- **Principal Analyst:**
- **Title:**
- **Date:** 02 / 27 / 10 (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: (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: 04 / 13 / 10
   - Description of Event: Golden State Warrior's 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: 20
   - 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: Supervisor Scott Haggerty District 1
   - Name of Individual or Organization: Well's Middle School
   - Number of Tickets: 20
   - Description of Organization: Middle School
   - Address of Organization: 6800 Penn Drive, Dublin CA 94568
   - Purpose for Distribution: (Describe the public purpose for the distribution to the organization.) to be used as a fundraiser item to benefit the school as a funding source for their campus

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: 04 / 13 / 10
   - Comment: (Use this space or an attachment for any additional information including amendment explanation.)
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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: 2/24/10
Description of Event: Mariah Carey
Face Value of Ticket: $19.25
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></td>
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</tr>
<tr>
<td></td>
<td></td>
<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: Kaye Aulenberry, Alameda County Board of Supervisors
Name of Individual or Organization: Helena Mol 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 her service 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 19944.1.

CRYSTAL HISHIDA GRAFF CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST
Print Name Title

Signature of Agency Head or Designee

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

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

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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: 02 / 06 / 10
   Description of Event: Golden State Warriors vs. Oklahoma City Thunder
   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) (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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</thead>
<tbody>
<tr>
<td>Carson, Keith</td>
<td>4</td>
<td>To obtain oversight of facilities or events.</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 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
   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: 02/10 (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
- 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

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

**2. Event For Which Tickets Were Distributed**
- **Date(s) of Event:** 02/25/10
- **Description of Event:** Mariah Carey
- **Face Value of Ticket:** $129.25

**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>
<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>4</td>
<td>To obtain oversight of facilities or events</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:**

**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**

**Print Name**

**Title**

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

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

FPPC Form 802 (Feb/03)

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 / 27 / 10
   
   **Description of Event:** MONSTER JAM
   
   **Face Value of Ticket:** $30.00
   
   **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) (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**
   
   [Blank Lines]

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:** DE DE DAVIS
   
   **Number of Tickets:** 4
   
   **Description of Organization:**
   
   [Blank Line]
   
   **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 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 18044.1.*

   **Signature of Agency Head or Designee**
   
   CRYSTAL HISHIDA GRAFF
   
   **Print Name**
   
   **Title**
   
   PRINCIPAL ANALYST
   
   **Date (month, day, year)**
   
   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)**
   
   **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
   
   **Date Stamp**
   
   **California Form**
   
   **TICKETS PROVIDED BY AGENCY REPORT**
   
   **Date of Original Filing:** 02/24/10
   
   **(month, day, year)**
   
   **Amendment (Must explain in Part 5.)**
   
   □
   
   **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:** 03/04/10
   
   **Description of Event:** Disney on Ice Presents Princess Classics
   
   **Face Value of Ticket:** $49.00
   
   **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) (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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<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:** Supervisor Alice Lai-Bitker, District 3
   
   **Name of Individual or Organization:** Kealani Mande
   
   **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 18044.1.
   
   **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.)
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@aogov.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: 2/26/10
   Description of Event: Mariah Carey
   Face Value of Ticket: $129.25
   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>
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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 Alice Lai-Bliter, District 3
   Name of Individual or Organization: Joseph Larkin
   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: [Signature]
   Print Name: CRYSTAL HISHIDA GRAFF
   Title: PRINCIPAL ANALYST
   Date: 2/26/10
   (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)

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

Date Stamp

California Form 802
For Official Use Only

Date of Original Filing: 02/22/10
(month, day, year)

2. Event For Which Tickets Were Distributed
Date(s) of Event: 2/17/10 Description of Event: Monster Jam
Face Value of Ticket: $30.00

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: 3 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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</tbody>
</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: Laura Briones Number of Tickets: 3

Description of Organization:

Address of Organization:

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 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.)
1. **Agency Name**
   COUNTY OF ALAMEDA

2. **Event For Which Tickets Were Distributed**
   - **Date(s) of Event:** 03 / 06 / 10
   - **Description of Event:** Disney on Ice - Worlds of Fantasy
   - **Face Value of Ticket:** $74.00
   - **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)**
   - **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)**
   - **Name of Behesting Agency Official:** Keith Carson, Supervisor Fifth District
   - **Name of Individual or Organization:** Esperanza Tervalon-Daumont
   - **Number of Tickets:** 4
   - **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:**
   - **Print Name:** CRISTAL HISHIDA GRAFF
   - **Title:** PRINCIPAL ANALYST
   - **Date:** 03/06/10

   **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)**

**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

**Date Stamp**

**California Form**
802

**For Official Use Only**

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

**Date of Original Filing:** 02/24/10
(month, day, year)

---

## 2. Event For Which Tickets Were Distributed

**Date(s) of Event:** 03 / 05 / 10

**Description of Event:** Disney on Ice Presents Princess Classics

**Face Value of Ticket:** $49.00

**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) (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></td>
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<tr>
<td></td>
<td></td>
<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:** Supervisor Alice Lai-Bitker, District 3

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

**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 18044.1.

**Signature of Agency Head or Designee**

**Print Name**

**Title**

**Date:** 02/24/10
(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**

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) 272-3862

**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:** 06-16-10  
   **Description of Event:** U2  
   **Face Value of Ticket:** $ 98.50

**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:** 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</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>
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<td></td>
</tr>
<tr>
<td></td>
<td></td>
<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:** Keith Carson, Supervisor Fifth District

**Name of Individual or Organization:** Alameda County Meals on Wheels  
**Number of Tickets:** 4

**Description of Organization:**  
Enable frail elders to maintain their independence at home by providing them with meals.

**Address of Organization:**
6955 Foothill Boulevard, Suite 300  
Oakland  
CA 94605

**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.

**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.)

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) 272-3892
   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: 06/16/10
   Description of Event: U2
   Face Value of Ticket: $98.50
   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: 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</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>TO REVIEW FACILITIES OR EVENTS THAT REQUIRE</td>
<td></td>
</tr>
<tr>
<td>SCOTT HAGGERTY- DISTRICT ONE</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 Scott 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 ____________________________
   Print Name CRYSTAL HISHIDA GRAFF
   Title PRINCIPAL ANALYST
   Date of Original Filing: (month, day, year) 2/3/10

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)

   Street Address
   1221 OAK STREET, #555, 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

   Amendment (Must explain in Part 5.)
   Date of Original Filing: 02/19/10 (month, day, year)

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 03 / 06 / 10
   Description of Event: Disney on Ice Presents Princess Classics
   Face Value of Ticket: $ 74.00

   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: Yes No

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: Kathy Martins
   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 18544.1.
   
   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.)

   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)

### Street Address
- 1221 OAK STREET, #555, 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:** 03/07/10
- **Description of Event:** Disney on Ice Presents Princess Classics
- **Face Value of Ticket:** $74.00
- **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)

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<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</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:** Supervisor Alice Lai-Bitker, District 3
- **Name of Individual or Organization:** Elizabeth Briones
- **Number of Tickets:** 4

### 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.

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<th>Signature of Agency Head or Designee</th>
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<th>Title</th>
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<tbody>
<tr>
<td>Crystal Hishida Graff</td>
<td>PRINCIPAL ANALYST</td>
<td></td>
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</tbody>
</table>

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

---

FPPC Form 892 (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: 03 / 05 / 10
   Description of Event: Disney On Ice
   Face Value of Ticket: $ 49.00
   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: Shonda Scott
   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 reward a community volunteer for 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 19944.1.
   Signature of Agency Head or Designee
   Print Name CRYSTAL HISHIDA GRAFF
   Title PRINCIPAL ANALYST
   Date 03/22/06
   (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
   (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 / 05 / 10
   Description of Event: Disney On Ice
   Face Value of Ticket: $49
   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>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
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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: Shonnell Gibbs
   Number of Tickets: 1
   Description of Organization:
   Address of Organization:
   Number and Street
   City
   State
   Zip Code
   Purpose for Distribution: To reward a student for outstanding scholastic achievement

5. Verification

   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 19944.1.

   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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 03 / 05 / 10
   Description of Event: Disney On Ice
   Face Value of Ticket: $ 49

   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>
<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: Karayah Gibbs
   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 reward a student for outstanding scholastic achievement

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 19944.1.

   Signature of Agency Head or Designee
   Signature: ____________________________
   Print Name: CRYSTAL HISHIDA GRAFF
   Title: 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

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

2. Event For Which Tickets Were Distributed
Date(s) of Event: 03 / 05 / 10
Description of Event: Disney On Ice
Face Value of Ticket: $ 49

Agency Event Yes No
(X) 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>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
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<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: Jazlynn Gibbs
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 reward a student for outstanding scholastic 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 CRYSTAL 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
(510) 272-3862
Agency Contact (name and title)
Crystal Hishida Graff, Principal Analyst, County Administrator's Office
E-mail
crystal.hishida@acgov.org

2. Event For Which Tickets Were Distributed
Date(s) of Event: 02 / 17 / 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 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>1</td>
<td>To obtain oversight of facilities or events that have received 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: Alameda County Supervisor Nate Miley, District 4
Name of Individual or Organization: ________________________________ 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.)

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

Signature of Agency Head or Designee Print Name Title

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
   E-mail crystal.hishida@acgov.org
   Agency Contact Crystal Hishida Graff, Principal Analyst, County Administrator’s Office

   Date Stamp

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 02/14/10
   Description of Event: Jeff Dunham
   Face Value of Ticket: $75
   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</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 Nate Miley, District 4
   Name of Individual or Organization: Tara H. Peterson
   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 reward a community volunteer for 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
   PRINCIPAL ANALYST
   Print Name
   Title
   Date of Original Filing: (month, day, year)

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

FPPC Form 802 (Feb/03)
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)

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

Date Stamp
California Form
802
For Official Use Only

2. Event For Which Tickets Were Distributed
Date(s) of Event: 02 / 19 / 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: ☑ 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 Alice Lai-Bitker, District 3

Name of Individual or Organization: Mei-Ling Bitker
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/Designee

CRystal HISHIDA Graff
PRINCIPAL ANALYST

Print Name
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 (866/275-3772)
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

   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: 02 / 23 / 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: □ 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: Supervisor Alice Lai-Bitker, District 3

   Name of Individual or Organization: Albert Teixeira

   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
   PRINCIPAL ANALYST

   Date
   02/18/2010
   (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: 855/ASK-FPPC (855/275-3772)
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 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: 02 / 23 / 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: □ 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>
</tr>
</thead>
<tbody>
<tr>
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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: Supervisor Alice Lai-Bitker, District 3
   Name of Individual or Organization: Shawn Wilson
   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
   CRYSTAL 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: 2/21/10
   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)

   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: Christopher Miley
   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 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
   Date (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: 02 / 26 / 10
   Description of Event: Mariah Carey
   Face Value of Ticket: $ 129.85
   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: Christopher Miley
   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 reward a community volunteer for his 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
   PRINCIPAL ANALYST
   Print Name
   Title
   (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
   3-GS, 2NM
## 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
- 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: 02/26/10
- Description of Event: Mariah Carey
- Face Value of Ticket: $29.25

### 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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</thead>
<tbody>
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</tr>
</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: Stephanie McLeod
- Number of Tickets: 1
- Description of 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]

CRYSTAL HISHIDA GRAFF
print name

PRINCIPAL ANALYST

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

3-GS, 2NM
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: 2 / 21 / 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)
   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: Nathaniel Harrison
   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 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 Official or Designee
   Print Name CRYSTAL HISHIDA GRAFF
   Title PRINCIPAL ANALYST
   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)
   Street Address
   1221 OAK STREET, #555, 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 / 23 / 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:    □ 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: Supervisor Alice Lai-Bitker, District 3
   Name of Individual or Organization: Kale Jenks Number of Tickets: 4
   Description of 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
   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
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Street Address
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 / 19 / 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: ☐ 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: Supervisor Alice Lai-Bitker, District 3

Name of Individual or Organization: Doug Rien
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: 02/16/10 (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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 03/17/10
   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: 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:
   ALAMEDA COUNTY SUPERVISOR SCOTT HAGGERTY DISTRICT ONE

   Name of Individual or Organization:
   CITY OF FREMONT HUMAN SERVICES DEP

   Number of Tickets:

   Description of Organization:
   SENIOR PROGRAMS

   Address of Organization:
   P.O. BOX 5006, FREMONT CA 94537

   Number and Street
   City

   State
   Zip Code

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

   to be used as a fundraiser item to benefit the CITY OF FREMONT SENIOR CENTER

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.)
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: 03/17/10
   Description of Event: Golden State Warrior's 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: ☑ 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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</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: Tri-Cities League of Volunteers
   Number of Tickets: 4
   Description of Organization: Non-profit organization providing food and services for the needy in the Tri-City area
   Address of Organization: 36120 Ruschin Drive Newark, CA 94560
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   to be used as a fundraiser item to benefit the League of Volunteers various programs

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

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 888/ASK-FPPC (888/275-3772)
Tickets Provided by
Agency Report

A Public Document

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   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 / 26 / 10
   Description of Event: Mariah Carey concert
   Face Value of Ticket: $ 29.25
   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>
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</thead>
</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 1
   Name of Individual or Organization: Denise Nguyen
   Number of Tickets: 4
   Description of Organization: 
   Address of Organization: 
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   to reward a community volunteer for 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)

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

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   COUNTY OF ALAMEDA
   Division, Department, or Region (if applicable)
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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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 03/17/10
   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: 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: Alameda County Supervisor Scott Haggerty, District 1
   Name of Individual or Organization: Mel Luna
   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 be reward a community volunteer for his 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]
   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.)
Tickets Provided by Agency Report
A Public Document

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

Date Stamp
California Form 802
For Official Use Only

2. Event For Which Tickets Were Distributed

Date(s) of Event: 03 / 15 / 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: ☐ Gratuitously ☒ Pursuant to Contract

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

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<th>Name of Official</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: Supervisor Alice Lai-Bitker, District 3

Name of Individual or Organization: Lorna Brown

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

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**

(510) 272-3882

**E-mail**

crystal.hishida@agov.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 / 06 / 10

**Description of Event:** Golden State Warriors vs. Oklahoma City Thunder

**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) (Use a continuation sheet for additional names)

<table>
<thead>
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<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:** Keith Carson, Supervisor Fifth District

**Name of Individual or Organization:** Mark Friedman

**Number of Tickets:** 4

**Description of Organization:**

**Address of Organization:**

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

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

To reward a County employee for his exemplary 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**

**Title**

**(Month, Day, Year)**

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

FPPC Form 802 (Feb/09)

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

2. Event For Which Tickets Were Distributed
Date(s) of Event: 02/06/10
Description of Event: Golden State Warriors vs. Oklahoma City Thunder
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>
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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: Keith Carson, Supervisor Fifth District
Name of Individual or Organization: Emalyn Lopez
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: Crystal Hishida Graff
Title: Principal Analyst
Comment: (Use this space or an attachment for any additional information including amendment explanation.)

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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 Stamp
   California Form 802
   For Official Use Only

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 02 / 19 / 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: 6
   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</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>
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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 Alice Lai-Bitker, District 3
   Name of Individual or Organization: John Smith
   Number of Tickets: 6
   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
   (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)

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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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 02 / 19 / 10
   Description of Event: Golden State Warriors Game
   Face Value of Ticket: $ 95.00

   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)

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<tr>
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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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</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: Jaime Lozano
   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
   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.)