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

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

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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 12 / 19 / 10
   Description of Event: Oakland Raiders vs. Denver Broncos
   Face Value of Ticket: $ 150.00

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

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

   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>
</tr>
</thead>
<tbody>
<tr>
<td>Brooks, Rodney</td>
<td>2</td>
<td>To promote attendance at a County facility</td>
</tr>
<tr>
<td>Shrage, Amy</td>
<td>2</td>
<td>To promote attendance at a County facility</td>
</tr>
</tbody>
</table>

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

   Name of Behesting Agency Official: ________________________________
   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: 11/10/10

   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
   ____________________________________________
1. **Agency Name**
   COUNTY OF ALAMEDA
   1221 OAK STREET, #555

2. **Division, Department, or Region (if applicable)**
   OAKLAND, CA 94612

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

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

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

6. **Event For Which Tickets Were Distributed**
   Date(s) of Event: 11 / 12 / 10
   Description of Event: Usher
   Face Value of Ticket: $156.00

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

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

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

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

11. **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: Amari Sweet
   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 student for outstanding scholastic achievement.

12. **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)
1. Agency Name  
COUNTY OF ALAMEDA  
Division, Department, or Region (if applicable)  
1221 OAK STREET, #555  
Street Address  
OAKLAND, CA 94612  
Area Code/Phone Number  
(510) 272-3882  
E-mail  
crystal.hishida@acgov.org  
Agency Contact (name and title)  
Crystal Hishida Graff, Principal Analyst, County Administrator's Office

2. Event For Which Tickets Were Distributed  
Date(s) of Event: 01/21/11  
Description of Event: Basketball Game  
Face Value of Ticket: $95.00

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

Number of Tickets Received: 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>
<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>
<td></td>
</tr>
</tbody>
</table>

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

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

Name of Individual or Organization: Canine Companions for Independence  
Number of Tickets: 2

Description of Organization: Provides trained canines for persons with disabilities

Address of Organization: PO Box 446 - Santa Rosa, CA 95402  
City:  
State:  
Zip Code:

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a non-profit 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]

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

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
**Event For Which Tickets Were Distributed**

- **Date(s) of Event:** 11 / 30 / 10
- **Description of Event:** Golden State Warriors Basketball
- **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

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

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Robyn Hodges</td>
<td>2</td>
<td>to reward a county employee for exemplary service</td>
</tr>
</tbody>
</table>

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

- **Name of Behesting Agency Official:** Supervisor Gail Steele
- **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.)

**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**: 11/9/10 (month, day, year)

**Comment**: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by
Agency Report
COUNTY OF ALAMEDA
1221 OAK STREET, #555
OAKLAND, CA 94612
(510) 272-3882
crystal.hishida@acgov.org
Crystal Hishida Graff, Principal Analyst, County Administrator's Office

2. Event For Which Tickets Were Distributed

Date(s) of Event: 11/12/10
Description of Event: Usher
Face Value of Ticket: $156.00
Agency Event: ☒ Yes ☐ No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: GSW
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>
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<tr>
<th>Name of Official (Last, First)</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 1
Name of Individual or Organization: John Mendez
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 an 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.

CRYSTAL HISHIDA GRAFF  PRINCIPAL ANALYST  11/9/10

Signature of Agency Head or Designee  Print Name  Title (month, day, year)

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

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: 11 / 30 / 10
Description of Event: Warriors v. Spurs
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: 20
Ticket(s) Provided to Agency: □ Gratuitously □ Pursuant to Contract

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

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

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
Name of Behesting Agency Official: Supervisor Gail Steele, District 2
Name of Individual or Organization: Alameda County Urban Male Health Initiative
Number of Tickets: 18
Description of Organization: collaboration of professional men who are concerned about the health of males at high risk
Address of Organization: 1000 Broadway
Oakland, CA 94612
Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
provide opportunities to those who are receiving services from County agencies...from Health Care Services/Pub. Health

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.)

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

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

Street Address
OAKLAND, CA 94612

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

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

2. Event For Which Tickets Were Distributed
Date(s) of Event: 12/19/10
Description of Event: Oakland Raiders v. Denver Broncos

Face Value of Ticket: $150

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

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

Number of Tickets Received: 4
Ticket(s) Provided to Agency: ☒ Gratuiously    ☒ 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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</tr>
</tbody>
</table>

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

Name of Behesting Agency Official: Supervisor Gail Steele

Name of Individual or Organization: Chabot College Foundation
Number of Tickets: 4

Description of Organization: fundraises for Chabot College to augment academic and other college programs

Address of Organization: 25555 Hesperian Blvd. Hayward, CA 94545

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
to reward a local non-profit which is helping 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]  CRYSTAL HISHIDA GRAFF  PRINCIPAL ANALYST
Print Name  Title

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

1. Agency Name
   COUNTY OF ALAMEDA

Division, Department, or Region (if applicable)

1221 OAK STREET, #555

Street Address

OAKLAND, CA 94612

Area Code/Phone Number
(510) 272-3882

E-mail
crystal.hishida@acgov.org

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

Date Stamp
California Form 802
For Official Use Only

☐ Amendment (Must explain in Part 5.)

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

2. Event For Which Tickets Were Distributed

Date(s) of Event: 11 / 05 / 10

Description of Event: Golden State Warriors vs. Utah Jazz

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

Name of Individual or Organization: Vincent Mitchell

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 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.

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.)

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 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

<table>
<thead>
<tr>
<th>Date(s) of Event:</th>
<th>Description of Event:</th>
<th>Face Value of Ticket:</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 / 10 / 10</td>
<td>Warriors v. Heat</td>
<td>$ 95</td>
</tr>
</tbody>
</table>

Agency Event  

☐ Yes  

☒ No (Identify source of tickets below.)

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

Number of Tickets Received: 20  

Ticket(s) Provided to Agency:  

☐ Gratuitously  

☒ Pursuant to Contract

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

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

Name of Individual or Organization: **Tri-Ced Community Recycling**

Number of Tickets: 20

Description of Organization: promotes community recycling with non-profits organizations

Address of Organization:  

33377 Western Ave,  

Union City,  

CA 94587

State and Street City Zip Code

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

to reward a non-profit 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]

CRYSTAL HISHIDA GRAFF  

Print Name

PRINCIPAL ANALYST

Title

(11/5/10) (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
   (510) 272-3882
crystal.hishida@acgov.org
   Crystal Hishida Graff, Principal Analyst, County Administrator's Office

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 02/03/11
   Description of Event: 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: GSW
   Number of Tickets Received: 4
   Ticket(s) Provided to Agency: ☑ Gratuonously  ☑ 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: Tara Pratt
   Number of Tickets: 4
   Description of Organization:
   Address of Organization:
   Number and Street
   City
   State
   Zip Code
   Purpose for Distribution: 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: Crystal Hishida Graff
   Title: Principal Analyst
   Date: 11/3/10
   (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
   Email 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: 11 / 03 / 10
   Description of Event: Golden State Warriors vs. Grizzlies
   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)

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: Jeffrey Harry
   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
   Print Name CRYSTAL HISHIDA GRAFF
   Title PRINCIPAL ANALYST
   Date Stamp 11 / 3 / 10
   (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)

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

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: 11/12/10          Description of Event: Usher Concert
Face Value of Ticket: $156.00
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>
</tr>
</thead>
<tbody>
<tr>
<td>(Last, First)</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: Alameda County Supervisor Nate Miley, District 4
Name of Individual or Organization: United Seniors of Oakland & Alameda County
Number of Tickets: 4
Description of Organization: Senior Advocacy
Address of Organization: 7200 Bancroft Ave, Ste 178 - Oakland, CA 946005
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 potential County revenue from parking

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

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

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

**Agency Name**
COUNTY OF ALAMEDA

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

**Street Address**
OAKLAND, CA 94612

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

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

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

---

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

**Date(s) of Event:**
- 02 / 05 / 11
- 02 / 13 / 11

**Description of Event:**
- 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:**
GSW

**Number of Tickets Received:**
8

**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>
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<tr>
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<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:**
Alameda County Supervisor Scott Haggerty, District 1

**Name of Individual or Organization:**
Dennis Fay

**Number of Tickets:**
8

**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 an 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**

**Date Stamp**
11 / 2 / 10

**(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)
   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: 11/05/10 01/21/11
   Description of Event: 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: GSW

   Number of Tickets Received: 8
   Ticket(s) Provided to Agency: ☒ Gratuitously □ Pursuant to Contract

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

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

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

   Name of Behesting Agency Official: Alameda County Supervisor Scott Haggerty, District 1

   Name of Individual or Organization: Dennis Fay
   Number of Tickets: 8

   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 an 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
   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
   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 / 13 / 11
   Description of Event: Basketball Game
   Face Value of Ticket: $ 95.00
   Agency Event  □ Yes  □ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 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>
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<td></td>
</tr>
</tbody>
</table>

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

   Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4
   Name of Individual or Organization: St. Rose Hospital Foundation
   Description of Organization: Provide support for St. Rose Hospital
   Number of Tickets: 2
   Address of Organization: 27200 Calaroga Avenue-Hayward, CA 94545
   Number and Street
   City
   State
   Zip Code
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   To reward a nonprofit organization for its contributions to the community

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.
   CRYSTAL HISHIDA GRAFF  PRINCIPAL ANALYST
   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.)
1. **Agency Name**
   - COUNTY OF ALAMEDA
   - Division, Department, or Region (if applicable): 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 / 02 / 11
   - Description of Event: Basketball Game
   - Face Value of Ticket: $95.00
   - Agency Event: □ Yes  □ No (Identify source of tickets below.)
   - Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   - Number of Tickets Received: 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: Peg Bledsoe & Steve Mopsikoff
   - Number of Tickets: 2
   - Description of Organization:
   - Address of Organization: 15942 Cambrian Drive, San Leandro, CA 94578
   - 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 their 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 16944.1.
   - Signature of Agency Head or Designee:  CRYSTAL HISHIDA GRAFF  PRINCIPAL ANALYST
   - Date: 11/2/10
   - Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by Agency Report

1. Agency Name
   COUNTY OF ALAMEDA
   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 / 16 / 11
   Description of Event: Basketball Game
   Face Value of Ticket: $ 95.00
   Agency Event: No
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 1
   Ticket(s) Provided to Agency: Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s)
   (use a continuation sheet for additional names)
   Name of Official (Last, First) | Number of Tickets | State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
   --------------- | --------------- | -------------------
   ------------------ | --------------- | -------------------
   ------------------ | --------------- | -------------------
   ------------------ | --------------- | -------------------
   ------------------ | --------------- | -------------------

4. Individual or Organization Receiving Ticket(s)
   (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4
   Name of Individual or Organization: Suzanne Labere
   Number of Tickets: 1
   Description of Organization: 
   Address of Organization: 
   Number and Street | City | State | Zip Code
   --------------- | ---- | ------ | ------
   ------------------ | ---- | ------ | ------
   ------------------ | ---- | ------ | ------
   Purpose for Distribution: To reward a community volunteer for their 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
   (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by
Agency Report

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

   Date Stamp

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 03 / 16 / 11
   Description of Event: Basketball Game
   Face Value of Ticket: $ 95.00
   Agency Event
   Yes  No
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 1
   Ticket(s) Provided to Agency
   Gratuitously  Pursuant to Contract

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

<table>
<thead>
<tr>
<th>Name of Official</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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<td></td>
</tr>
</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4
   Name of Individual or Organization: Margaret Glyer
   Number of Tickets: 1
   Description of Organization:
   Address of Organization:  
   Number and Street
   City
   State
   Zip Code
   Purpose for Distribution: To reward a community volunteer for their 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.
   CRYSTAL HISHIDA GRAFF  PRINCIPAL ANALYST
   Signature of Agency Head or Designee
   Date: 11/2/10
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
1. Agency Name
   COUNTY OF ALAMEDA

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

Street Address
OAKLAND, CA 94612

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

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

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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 11 / 19 / 10
   Description of Event: Basketball Game
   Face Value of Ticket: $ 95.00

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

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

   Number of Tickets Received: 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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</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: Community Prevention
   Number of Tickets: 4

   Description of Organization: Education and programs to reduce/prevent the sales of alcohol to youth

   Address of Organization: 1558 B Street, Suite 201 - Hayward, CA 94541
   Number and Street: 1558 B Street
   City: Hayward
   State: CA
   Zip Code: 94541

   Purpose for Distribution: To reward a 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
   CRYSTAL HISHIDA GRAFF
   Print Name
   Principal Analyst

   Title

   Date (month, day, year)

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

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: 12/14/10
   Description of Event: Basketball Game
   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
   Face Value of Ticket: $95.00
   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:
   Women on the Way to Recovery
   Number of Tickets: 4
   Description of Organization:
   Re-entry program for women
   Address of Organization:
   20424 Haviland, Hayward, CA 94541
   City
   State
   Zip Code
   Purpose for Distribution:
   To reward a nonprofit organization for its contributions to the community

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.
   ____________________________
   Signature of Agency Head or Designee
   CRISTAL HISHIDA GRAFF
   Print Name
   PRINCIPAL ANALYST
   Title
   11/2/10
   (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)

FPPC Form 802 (Feb/09)
FPPC Toll-Free 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: 11 / 28 / 10
Description of Event: Raiders Game
Face Value of Ticket: $150

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: ___________________________

Name of Individual or Organization: Larua Pinon
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.)
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: CRYSTAL HISHIDA GRAFF

PRINCIPAL ANALYST

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)
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COUNTY OF ALAMEDA

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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: 11 / 22 / 10
Description of Event: 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:

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

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

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

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

Name of Behesting Agency Official: Alameda County Supervisor Scott Haggerty, District

Name of Individual or Organization: Helen Graham
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 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] Crystal Hishida Graff
Print Name
Title Principal Analyst

(month, day, year)

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

   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: 01 / 07 / 11
   Description of Event: Warriors game
   Face Value of Ticket: $95.00
   Agency Event: [X] No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: 
   Number of Tickets Received: 4
   Ticket(s) Provided to Agency: [X] Pursuant to Contract

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

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

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

   Name of Behesting Agency Official: Alameda County Supervisor Scott Haggerty, District
   Name of Individual or Organization: Northern California Compassion Network  
   Number of Tickets: 4
   Description of Organization: Organization for troubled youth
   Address of Organization: 3259 School Street, Oakland, CA 94602
   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: [Signature]
   Print Name: CRYSTAL HISHIDA GRAFF
   Title: PRINCIPAL ANALYST
   Date: 11/19/10
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
1. Agency Name
COUNTY OF ALAMEDA

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

Street Address
OAKLAND, CA 94612

Area Code/Phone Number
(510) 272-3882

E-mail
crystal.hishida@acgov.org

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

2. Event For Which Tickets Were Distributed

Date(s) of Event: 12/17/10
Description of Event: Radio City Christmas Spectacular

Face Value of Ticket: $71.00

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>
</tr>
</thead>
<tbody>
<tr>
<td>Carson, Keith</td>
<td>2</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: Carol Music
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.

CRISTAL HISHIDA GRAFF
CR PRINCIPAL ANALYST

(Leave blank)

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

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

☐ Amendment (Must explain in Part 5.)

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

2. Event For Which Tickets Were Distributed

Date(s) of Event: 12/16/10
Description of Event: Radio City Christmas Spectacular
Face Value of Ticket: $ 71.00
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>
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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: Ian Hunter - CEID
Number of Tickets: 4
Description of Organization: Provides a wide range of services & supports for families to maximize communication.
Address of Organization: 1035 Grayson St.
Number and Street
Berkeley
City
CA 94710
State Zip Code
Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
To reward a 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 of Designee]

CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST
Print Name Title

(11/18/10)
(month, day, year)

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

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
1. **Agency Name**
   - COUNTY OF ALAMEDA
   - Division, Department, or Region (if applicable)

2. **Agency Contact**
   - Name and Title: Crystal Hishida Graff, Principal Analyst, County Administrator's Office

3. **Event For Which Tickets Were Distributed**
   - **Date(s) of Event:** 12 / 03 / 10
   - **Description of Event:** Rodger Waters
   - **Face Value of Ticket:** $131.75
   - **Agency Event:** Yes
   - **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

4. **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**

5. **Individual or Organization Receiving Ticket(s)**
   - **Name of Behesting Agency Official:** Supervisor Alice Lai-Bitker, District 3
   - **Name of Individual or Organization:** Bernardino Briones
   - **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

6. **Verification**
   - **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.)

---

**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)

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

Acknowledgment (must explain in Part 5)

Date of Original Filing: [month, day, year]

2. Event For Which Tickets Were Distributed
Date(s) of Event: 04/02/11 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: ☒ Granted 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>
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<tr>
<td></td>
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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: 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 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 PRINCIPAL ANALYST

Print Name Title

(month, day, year)

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

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

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

   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: 12/11/10
   Description of Event: The Judds
   Face Value of Ticket: $96.35

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

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

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

   Name of Individual or Organization: Kevin Kopjak
   Number of Tickets: 2

   Description of Organization:

   Address of Organization:
   Number and Street
   City
   State
   Zip Code

   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   To promote attendance at an event held at a County facility in order to maximize County revenue from concession sales

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

   [Signature of Agency Head or Designee]
   CRYSTAL HISHIDA GRAFF
   PRINCIPAL ANALYST
   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)
1. Agency Name
COUNTY OF ALAMEDA

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: 11/22/10 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>
</tr>
</thead>
<tbody>
<tr>
<td>Laws, Jerl</td>
<td>4</td>
<td>To promote attendance at County facility to max sales</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: ___________________________ 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.) To promote attendance at event held at a County facility in order to maximize 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
Print Name Title

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
   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: 11/27/10
   Description of Event: Andre Ward vs. Sakio Bika WBA Super Middleweight
   Face Value of Ticket: $95.60
   Agency Event
   [ ] Yes [x] No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 4
   Ticket(s) Provided to Agency: [ ] Gratuitously [x] Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)
<table>
<thead>
<tr>
<th>Name of Official (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 evaluate the ability of a facility to attract business.</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: Carol Music
   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
   Print Name
   Title
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
   (month, day, year)
   FPPC Form 892 (Feb/09)
   FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
## 2. Event For Which Tickets Were Distributed

Date(s) of Event: 03/11/11  
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>
<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: Robert Pace  
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 potential County revenue from sales

## 5. Verification

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

Signature of Agency Head or Designee:  
Crystal Hishida Graff  
Principal Analyst  
Date: 11/12/10

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

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

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

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

**Event For Which Tickets Were Distributed**

<table>
<thead>
<tr>
<th>Date(s) of Event:</th>
<th>Description of Event:</th>
<th>Face Value of Ticket:</th>
</tr>
</thead>
<tbody>
<tr>
<td>11/28/10</td>
<td>Oakland Raiders Game</td>
<td>$150.00</td>
</tr>
</tbody>
</table>

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

**Number of Tickets Received:** 3

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

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

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Briones, Ruben</td>
<td>3</td>
<td>To promote attendance at County event to max sales</td>
</tr>
</tbody>
</table>

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

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

- **Name of Individual or Organization:**

<table>
<thead>
<tr>
<th>Number of Tickets:</th>
</tr>
</thead>
</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:**
To promote attendance at event held at a County facility to maximize potential County revenue from concession sales

**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:** 11/7/10 (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 Crystal Hishida Graff, Principal Analyst, County Administrator's Office

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 11 / 15 / 10
   Description of Event: Golden State Warriors vs. Detroit Pistons
   Face Value of Ticket: $ 95.00
   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;
   Name of Official Number of Tickets State Whether the Distribution is Income to the Official or
   (Last, First) to 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: Matthew Smith
   Number of Tickets: 4
   Description of Organization:
   Address of Organization: Number and Street
   City State Zip Code
   Purpose for Distribution: 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.
   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.)

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: 11/22/10
Description of Event: Warriors v. Nuggets
Face Value of Ticket: $95

Agency Event: No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
Number of Tickets Received: 4
Ticket(s) Provided to Agency: Pursuant to Contract

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

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
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<tbody>
<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 Gail Steele
Name of Individual or Organization: Alameda County Health Care Foundation
Number of Tickets: 4
Description of Organization: Raises funds in support of Alameda County Medical Center
Address of Organization: 2001 Broadway, Ste. M Oakland CA 94612
City State Zip Code
Purpose for Distribution: to reward a non-profit 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
CRystal HishIDA GraFF PRINCIPAL ANALYST
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   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: 11/15/10   Description of Event: Warrior's Game
Face Value of Ticket: $95.00
Agency Event □ Yes  □ No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: GSW
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>
<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: Alameda County Supervisor Scott Haggerty, District 1

Name of Individual or Organization: Individual- Michelle Legins   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 nonprofit for it's contributions to the community.

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

Signature of Agency Head or Designee
CRystal Hishida Graff  PRINCIPAL ANALYST
Print Name  Title
(month/day/year)

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

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

**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**

**CA Form 802**

**TICKETS PROVIDED BY AGENCY REPORT**

**Event For Which Tickets Were Distributed**

<table>
<thead>
<tr>
<th>Date(s) of Event:</th>
<th>Description of Event:</th>
<th>Face Value of Ticket:</th>
</tr>
</thead>
<tbody>
<tr>
<td>12 / 27 / 10</td>
<td>Warriors v. 76ers</td>
<td>$95</td>
</tr>
</tbody>
</table>

**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

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

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

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

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

**Name of Individual or Organization**: League of Women Voters Eden Area

**Number of Tickets**: 4

**Description of Organization**: promotes civic involvement in the electoral process and educates about ballot box issues

**Address of Organization**: P.O. Box 2234

**City**: Castro Valley, CA

**State**: 94546

**Zip Code**: 

**Purpose for Distribution**: to reward a local non-profit which is helping the community

**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.)

**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: 11/28/10
   Description of Event: Raiders v. Dolphins
   Face Value of Ticket: $150
   Agency Event
   □ Yes  ☑ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Oakland Raiders
   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></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 Gail Steele, District 2
   Name of Individual or Organization: Alameda County Urban Male Health Initiative
   Number of Tickets: 4
   Description of Organization: collaboration of professional men who are concerned about the health of males at high risk
   Address of Organization:
   1000 Broadway
   Oakland, CA 94612
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   provide opportunities to those who are receiving services from County agencies...from Health Care Services/Pub. Health

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: [Name]
   Title: [Title]
   (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by
Agency Report

1. Agency Name
COUNTY OF ALAMEDA

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

Street Address
OAKLAND, CA 94612

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

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

2. Event For Which Tickets Were Distributed

<table>
<thead>
<tr>
<th>Date(s) of Event: 11 /27/ 10</th>
<th>Description of Event: Andre Ward Boxing</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Face Value of Ticket: $ 95.60</td>
</tr>
</tbody>
</table>

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

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

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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</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 1

Name of Individual or Organization: Jay Nelson 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 a County facility inorder 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.

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.)

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

2. **Event For Which Tickets Were Distributed**
   - Date(s) of Event: 12 / 03 / 10
   - Description of Event: Roger Waters Concert
   - Face Value of Ticket: $131.75

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: Patricia Brooks and Taeg Murdock
   - 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: [Signature]
   - Print Name: CRYSTAL HISHIDA GRAFF
   - Title: PRINCIPAL ANALYST
   - Date: 11/30/10

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

and concession sales
Tickets Provided by Agency Report

A Public Document

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

   Date Stamp California Form 802
   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: 12 / 11 / 10
   Description of Event: The Judd's Concert
   ______/_____/______ Face Value of Ticket: $ 96.35
   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 Nate Miley, District 4
   Name of Individual or Organization: United Seniors of Oakland & Alameda County
   Number of Tickets: 4
   Description of Organization: Senior Advocacy
   Address of Organization: 7200 Bancroft Ave, Ste 178 - Oakland, CA 94605
   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 potential County revenue from parking

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 explanations.)
   and concession sales

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

2. Event For Which Tickets Were Distributed  
   Date(s) of Event: 12/03/10  
   Description of Event: Roger Waters Concert  
   Face Value of Ticket: $131.75  
   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: 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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</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)  
   Name of Behesling Agency Official: Alameda County Supervisor Nate Miley, District 4  
   Name of Individual or Organization: Peter Marcotte and Clarice Readus  
   Number of Tickets: 2  
   Description of Organization:  
   Address of Organization:  
   Number and Street:  
   City:  
   State:  
   Zip Code:  
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
   To promote attendance at an event held at a County facility in order to maximize potential County revenue from parking  

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.)  
   and concession sales  
   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 Crystal Hishida Graff, Principal Analyst, County Administrator's Office

2. Event For Which Tickets Were Distributed
Date(s) of Event: 12/03/10
Description of Event: Rodger Waters
Face Value of Ticket: $131.75
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 (Last, First)</th>
<th>Number of Tickets</th>
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<tbody>
<tr>
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</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: Alameda County Supervisor Scott Haggerty, District 1
Name of Individual or Organization: Kristin Silva
Number of Tickets: 4
Description of Organization: 
Address of Organization: 
Purpose for Distribution: 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

Print Name

Title

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

Crystal Hishida Graff, Principal Analyst

Date Stamp California Form 802
For Official Use Only
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 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

AMendment (Must explain in Part 5.)

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

2. Event For Which Tickets Were Distributed

Date(s) of Event: 11/27/10 Description of Event: Andre Ward vs. Blka

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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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: Lanenna Joiner

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 18944.1.

Signature of Agency Head or Designee: CRYSTAL HISHIDA GRAFF PRINT NAME: 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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 11/27/10
   Description of Event: Andre Ward vs. Blka
   Face Value of Ticket: $95.60
   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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<td></td>
</tr>
</tbody>
</table>

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

   Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4
   Name of Individual or Organization: Lawana Stewart
   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 18944.1.

   Signature of Agency Head or Designee: [Signature]
   Print Name: CRYSTAL HISHIDA GRAFF
   Title: PRINCIPAL ANALYST
   Date: 11/26/10

   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

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

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: 11/27/10
Description of Event: Andre Ward vs. Bilka
Face Value of Ticket: $95.60
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: □ Gratuity □ 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 (Last, First)</th>
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</tbody>
</table>

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4
Name of Individual or Organization: Sonia Langford
Number of Tickets: 1
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 PRINCIPAL ANALYST
Print Name Title
11/20/10 (month, day, year)

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

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Tickets Provided by
Agency Report
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: 11 / 27 / 10
   Description of Event: Andre Ward vs. Bilka
   Face Value of Ticket: $ 95.60
   Agency Event: ☑ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 1
   Ticket(s) Provided to Agency: ☑ Pursuant to Contract

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

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

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4
   Name of Individual or Organization: Geoffrey Pete
   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.
   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.)
   W 23/10
   (month, day, year)
**Tickets Provided by Agency Report**

**A Public Document**

**1. Agency Name**
COUNTY OF ALAMEDA

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

**Street Address**
OAKLAND, CA 94612

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

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

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

**Date Stamp**

**California Form 802**
For Official Use Only

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

<table>
<thead>
<tr>
<th>Date(s) of Event</th>
<th>Description of Event</th>
<th>Face Value of Ticket</th>
</tr>
</thead>
<tbody>
<tr>
<td>11 / 12 / 10</td>
<td>Usher Concert</td>
<td>$ 156.00</td>
</tr>
</tbody>
</table>

**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>
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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 Beheseting Agency Official:**
Alameda County Supervisor Nate Miley, District 4

**Name of Individual or Organization:**
United Seniors of Oakland & Alameda County

**Number of Tickets:** 2

**Description of Organization:**
Senior Advocacy

**Address of Organization:**
7200 Bancroft Ave, Ste 178 - Oakland, CA 946005

**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 potential County revenue from parking

**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 of 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.)

and concession sales - G.S. seats

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: __________ (month, day, year)

2. Event For Which Tickets Were Distributed
   Date(s) of Event: ________ / ________ / ________
   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: ________
   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: Eden League of Women Voters
   Number of Tickets: ________
   Description of Organization: Non-partisan political organization encouraging informed and active participation of citizens
   Address of Organization: PO Box 2234, Castro Valley, CA 94546
   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: 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
   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: 11 / 27 / 10
   Description of Event: Andre Ward Boxing
   Face Value of Ticket: $95.60
   Agency Event ☑ Yes ☐ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: GSW
   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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<tr>
<th>Name of Official (Last, First)</th>
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</table>

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

   Name of Behesting Agency Official: Alameda County Supervisor Scott Haggerty, District 1
   Name of Individual or Organization: Jay Nelson
   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 a County facility inorder 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
   Print Name
   PRINCIPAL ANALYST
   Title
   (month, day, year)

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

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

1. Agency Name
   COUNTY OF ALAMEDA
   Division, Department, or Region (if applicable)
   1221 OAK STREET, #555
   Street Address
   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: 01/24/11
   Description of Event: Golden State Warriors vs. San Antonio Spurs
   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>
<td>(Last, First)</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: Terrell Santiago
   Number of Tickets: 4
   Description of Organization:
   Address of Organization: 4171 MacArthur Blvd. Oakland CA 94619
   Number and Street City State Zip Code
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   To reward a community volunteer for his or her service to the public.

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.
   Signature of Agency Head or Designee: CRYSTAL HISHIDA GRAFF
   Print Name: PRINCIPAL ANALYST
   Title: (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by
Agency Report

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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 01/07/10
   Description of Event: Golden State Warriors vs. Cleveland Cavaliers
   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
   Sanchez, Mina  1  To promote attendance at a County

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: Napoleon Sanchez
   Number of Tickets: 3
   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.
   CRYSTAL HISHIDA GRAFF
   Print Name
   PRINCIPAL ANALYST
   Title
   Date
   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 (name and title)
Crystal Hishida Graff, Principal Analyst, County Administrator's Office

2. Event For Which Tickets Were Distributed
Date(s) of Event: 12 / 27 / 10

Description of Event: Golden State Warriors vs. Philadelphia 76ers

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: 8

Ticket(s) Provided to Agency: ☐ Gratuously □ 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>Shrago, Amy</td>
<td>2</td>
<td>To promote attendance at a County facility</td>
</tr>
</tbody>
</table>

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

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District

Name of Individual or Organization: James McClay

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 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
Print Name: PRINCIPAL ANALYST
Title: 11/23/10
(month, day, year)

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

FPPC Form 802 (Feb09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
1. **Agency Name**
   - COUNTY OF ALAMEDA
   - 1221 OAK STREET, #555
   - OAKLAND, CA 94612

2. **Event For Which Tickets Were Distributed**
   - **Date(s) of Event:** 01 / 21 / 11
   - **Description of Event:** Golden State Warriors vs. Sacramento Kings
   - **Face Value of Ticket:** $95.00

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:** Kim Gillette
   - **Number of Tickets:** 4
   - **Description of Organization:**
   - **Address of Organization:**
   - **Purpose for Distribution:** To reward a community volunteer for his or her service to the public

5. **Verification**
   - **Signature of Agency Head or Designee:**
   - **Print Name:** CRYSTAL HISHIDA GRAFF
   - **Title:** PRINCIPAL ANALYST
   - **Date:** 11/25/10
   - **Comment:** (Use this space or an attachment for any additional information including amendment explanation.)

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