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

2. Event For Which Tickets Were Distributed
   Date(s) of Event:   04 / 20 / 11
   Description of Event:   Oakland A's
   Face Value of Ticket:   $ 43.75

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

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

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

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

   Name of Official (Last, First)   Number of Tickets   State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
   Miley, Christopher   1   To encourage staff development

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

   Name of Behesting Agency Official:   Supervisor Nadia Lockyer, District 2

   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 encourage staff development

5. Verification

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

   Signature of Agency Head or Designee
   CRISTAL HISHIDA GRAFF   PRINCIPAL ANALYST
   Print Name   Title

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

   (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

   Amendment (Must explain in Part 5.)

   Date Stamp

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

2. Event For Which Tickets Were Distributed

   Date(s) of Event: 05 / 01 / 11

   Description of Event: Oakland A's vs. Texas Rangers

   Face Value of Ticket: $43.75

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

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

   Number of Tickets Received: 10

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

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

<table>
<thead>
<tr>
<th>Name of Official</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>
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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: Keith Carson, Supervisor Fifth District

   Name of Individual or Organization: South Berkeley Senior Center

   Number of Tickets: 10

   Description of Organization: Senior Services Center

   Address of Organization: 2939 Ellis Street

   Berkeley

   CA 94703

   Purpose for Distribution: To reward a school or nonprofit organization for its contributions to the community

5. Verification

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

   Signature of Agency Head or Designee
   CRYSTAL HISHIDA GRAFF
   Print Name

   PRINCIPAL ANALYST
   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 (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 / 06 / 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>Miley, Nate</td>
<td>2</td>
<td>To evaluate the ability of a facility or a local sports team to attract business and contribute to the local economy</td>
</tr>
</tbody>
</table>

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

   Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4
   Name of Individual or Organization: ___________________________________________
   Number of Tickets: ______________
   Description of Organization: ________________________________________________
   Address of Organization: ____________________________________________________
   Number and Street ______________ City __________________ State __________ Zip Code
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

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

   [Signature of Agency Head or Designee]
   CRYSTAL HISHIDA GRAFF
   PRINCIPAL ANALYST
   (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)

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

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

**Street Address**
1221 OAK STREET, #655, 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

---

**Event For Which Tickets Were Distributed**

**Date(s) of Event:** 04 / 20 / 11

**Description of Event:** Oakland A's

**Face Value of Ticket:** $43.75

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

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

**Number of Tickets Received:** 1

**Ticket(s) Provided to Agency:**
- ☑ 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>1</td>
<td>To encourage staff development</td>
</tr>
</tbody>
</table>

---

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

**Name of Behesting Agency Official:** Supervisor Nadia Lockyer, District 2

**Name of Individual or Organization:**

**Number of Tickets:**

**Description of Organization:**

**Address of Organization:**

**Purpose for Distribution:** To encourage staff development

---

**Verification**

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

**Signature of Agency Head or Designee**

**Print Name**

**Title**

**Date:** 4/8/11

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

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

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

   Area Code/Phone Number | 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: 04 / 20 / 11
   Description of Event: Oakland A's
  面值: $43.75

   Agency Event  □ Yes  □ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Oakland A's
   Number of Tickets Received: 1 Ticket(s) Provided to Agency:  □ Gratuitously  □ Pursuant to Contract

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

   Name of Official (Last, First) | Number of Tickets | State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
   Lockyer, Nadia | 1 | To encourage staff development

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: Supervisor Nadia Lockyer, District 2
   Name of Individual or Organization: ____________________________ Number of Tickets: _______
   Description of Organization: ____________________________
   Address of Organization: ____________________________
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   To encourage staff development

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

2. **Event For Which Tickets Were Distributed**
   - **Date(s) of Event:** 04/15/11
   - **Description of Event:** Oakland A's
   - **Face Value of Ticket:** $38.00

3. **Agency Official(s) Receiving Ticket(s)**
<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

4. **Individual or Organization Receiving Ticket(s)**
   - **Name of Behesting Agency Official:** Supervisor Nadia Lockyer, District 2
   - **Name of Individual or Organization:** George Dianda
   - **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 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:**
     - **CRystal Hishida GraFF**
     - **Principal Analyst**
   - **Comment:** (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by
Agency Report

A Public Document

1. Agency Name
COUNTY OF ALAMEDA

Division, Department, or Region (if applicable)

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

Area Code/Phone Number 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: 09/20/11

Description of Event: Oakland A's

Face Value of Ticket: $ 43.75

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

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

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

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

Name of Behesting Agency Official: Supervisor Nadia Lockyer, District 2

Name of Individual or Organization: Sharon Sage

Number of Tickets: 4

Description of Organization:

Address of Organization:

Number and Street City State Zip Code

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

To reward a community volunteer for her service to the public

5. Verification

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

Signature of Agency Head or Designee: CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST

Print Name: Title

(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:** 04/20/11

**Description of Event:** Baseball Game

**Face Value of Ticket:** $38.00

**Agency Event**

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

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

**Number of Tickets Received:** 2

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

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

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
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<tr>
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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:** United Seniors of Oakland & Alameda County

**Number of Tickets:** 2

**Description of Organization:** Senior Advocacy

**Address of Organization:** 7200 Bancroft Ave, Ste 251 - Oakland, CA 94605

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

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

To motivate and provide expanded opportunities to vulnerable populations in the County such as seniors.

## 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.)

PLAZA SEATS

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
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: 04 / 20 / 11
   Description of Event: Rod Stewart & Stevie Nicks Concert
   Face Value of Ticket: $ 173.85
   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: [☐ 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>
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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: Denise LaGrand
   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 volunteer for her services 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
   (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by
Agency Report

1. Agency Name
   COUNTY OF ALAMEDA
   Division, Department, or Region (if applicable)
   1221 OAK STREET, #555
   Street Address
   OAKLAND, CA 94612
   Area Code/Phone Number  (510) 272-3882
   E-mail crystal.hishida@acgov.org
   Agency Contact (name and title)
   Crystal Hishida Graff, Principal Analyst, County Administrator’s Office
   Date Stamp
   California Form 802
   For Official Use Only
   Amendment  (Must explain in Part 5.)
   Date of Original Filing: __________
   (month, day, year)

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 07 / 02 / 11
   Description of Event: Oakland A’s vs. Arizona Diamondbacks
   Face Value of Ticket: $ 43.75
   Agency Event
   Yes ☐  No ☒ (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Oakland A’s
   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>
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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: Keith Carson, Supervisor Fifth District
   Name of Individual or Organization: Angélique Horton Getreu
   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.
   ________________________________  ________________________________  __________
   Signature of Agency Head or Designee  Print Name  PRINCIPAL ANALYST
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)

   CRISTAL HISHIDA GRAFF  PRINCIPAL ANALYST
   4/20/11 (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**

<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>03/28/11</td>
<td>Oakland A's vs.</td>
<td>$43.75</td>
</tr>
</tbody>
</table>

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

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

**Number of Tickets Received:** 4

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

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

<table>
<thead>
<tr>
<th>Name of Official (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)**

<table>
<thead>
<tr>
<th>Name of Behesting Agency Official:</th>
<th>Keith Carson, Supervisor Fifth District</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Name of Individual or Organization:</th>
<th>Chris Leung</th>
<th>Number of Tickets: 4</th>
</tr>
</thead>
</table>

| Description of Organization: | |
|------------------------------| |

<table>
<thead>
<tr>
<th>Address of Organization:</th>
<th>Number and Street</th>
<th>City</th>
<th>State</th>
<th>Zip Code</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Purpose for Distribution:</th>
<th>(Describe the public purpose for the distribution to the organization.)</th>
</tr>
</thead>
</table>

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

**5. Verification**

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

[Signature of Agency Head or Designee]

CRISTAL HISHIDA GRAFF

PRINCIPAL ANALYST

Print Name

Title

3/28/11 (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
<table>
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<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 1

Name of Individual or Organization: Livermore Valley Winegrowers Foundation

Number of Tickets: 20

Description of Organization: partnership of local vintners/growers promoting the Livermore Valley winegrowing region

Address of Organization: 3585 Greenville Road, Suite 4, Livermore, CA 94550

Number and Street: 3585 Greenville Road, Suite 4

City: Livermore

State: CA

Zip Code: 94550

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: [Signature]

CRystal Hishida Graff

Print Name: Crystal Hishida Graff

Principal Analyst

Title: Principal Analyst

(4/12/11) (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)*

   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: 04 / 20 / 11
   Description of Event: Oakland A's
   Face Value of Ticket: $ 43.75

   Agency Event   ☑ No *(Identify source of tickets below.)*
   Name of Outside Source of Ticket(s) Provided to Agency: Oakland A's

   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 <em>(Last, First)</em></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>Ahad, Rozan</td>
<td>1</td>
<td>To encourage staff development</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 Nadia Lockyer, District 2

   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 encourage staff development

5. Verification

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

   Signature of Agency Head or Designee
   CRISTAL HISHIDA GRAFF  PRINCIPAL ANALYST
   Print Name  Title
   (month, day, year)

   Comment: *(Use this space or an attachment for any additional information including amendment explanations.)*
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:  
06 / 29 / 11  
06 / 30 / 11  
Description of Event:  
A's seat tickets  
Face Value of Ticket:  
$38.00  
Agency Event  
☑ Yes  
☐ No (Identify source of tickets below.)  
Name of Outside Source of Ticket(s) Provided to Agency:  
Oakland Athletics  
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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<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Individual or Organization Receiving Ticket(s)  
(Provided at the behest of an agency official.)  
Name of Hosting Agency Official:  
Alameda County Supervisor Scott Haggerty, District 1  
Name of Individual or Organization:  
Livermore-Granada Boosters  
Number of Tickets:  
4  
Description of Organization:  

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

1. Agency Name  
COUNTY OF ALAMEDA
Division, Department, or Region (if applicable)
1221 OAK STREET, #555
Street Address
OAKLAND, CA  94612
Area Code/Phone Number  
(510) 272-3862
E-mail  
crystal.hishida@acgov.org
Agency Contact (name and title)
Crystal Hishida Graff, Principal Analyst, County Administrator's Office

Date Stamp

2. Event For Which Tickets Were Distributed
Date(s) of Event: 04/06/11  
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: Christine Graham  
Number of Tickets: 2
Description of Organization:
Address of Organization:
Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
To promote attendance at 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.

CRystal Hishida Graff  
Print Name
Principal Analyst  
Title

Signature of Agency Head or Designee  
(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

1. Agency Name
   COUNTY OF ALAMEDA
   Division, Department, or Region (if applicable)
   
   Street Address
   1221 OAK STREET, #555, OAKLAND, CA 94612
   
   Area Code/Phone Number E-mail
   (510) 272-3882 crystal.hishida@acgov.org
   
   Agency Contact (name and title)
   Crystal Hishida Graff, Principal Analyst, County Administrator's Office
   
2. Event For Which Tickets Were Distributed
   Date(s) of Event: 06 / 18 / 11
   Description of Event: Oakland A's game
   __________/________/______ Face Value of Ticket: $38.00

   Agency Event □ Yes  ❑ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Oakland Athletics
   
   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>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

   Name of Behesting Agency Official: Supervisor Wilma Chan, District 3
   Name of Individual or Organization: Michelle Batz
   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 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
   (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

Division, Department, or Region (if applicable)

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

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

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

Date Stamp

Amendment (Must explain in Part 5.)

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

Event For Which Tickets Were Distributed

Date(s) of Event: 07 / 02 / 11 Description of Event: Oakland A's

Face Value of Ticket: $43.75

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

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

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

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

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

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

Name of Behesting Agency Official: Supervisor Nadia Lockyer, District 2

Name of Individual or Organization: Eric Emerson 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 service to the public

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)

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: 05 / 28 / 11
Description of Event: Oakland A's
Face Value of Ticket: $ 43.75

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

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

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>
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</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: Supervisor Nadia Lockyer, District 2

Name of Individual or Organization: Kristine Metzner
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 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.

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

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

1. Agency Name
COUNTY OF ALAMEDA

Division, Department, or Region (if applicable)

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

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

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

Date Stamp

2. Event For Which Tickets Were Distributed

Date(s) of Event: 04/16/11 Description of Event: Oakland A's

Face Value of Ticket: $ 43.75

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

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

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>
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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: Supervisor Nadia Lockyer, District 2

Name of Individual or Organization: Jan Vincent Number of Tickets: 4

Description of Organization:

Address of Organization:
Number and Street City State Zip Code

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

To reward a community volunteer for her service to the public

5. Verification

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

Signature of Agency Head or Designee

CRystal HISHIDA GRAFF PRINCIPAL ANALYST

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

1 PARKING PASS
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: 07 / 27 / 11
   Description of Event: Oakland A's Skybox
   Face Value of Ticket: $1,500
   Agency Event □ Yes  □ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency:
   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)
   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: Alameda County Meals on Wheels
   Number of Tickets: 20
   Description of Organization: Free food delivery to home bound seniors
   Address of Organization: PO Box 14002, Oakland, CA 94614
   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
   Signatures of Agency Head or Designee
   Print Name
   Title
   Date (month, day, year)

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

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

1. Agency Name
COUNTY OF ALAMEDA

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

Street Address
OAKLAND, CA 94612

Area Code/Phone Number (510) 272-3882
E-mail 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: 04/24/11
Description of Event: Lil' Wayne
Face Value of Ticket: $142.95

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

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

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

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

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

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

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

Name of Individual or Organization: James Brown
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 16944.1.

Signature of Agency Head or Designee CRISTAL HISHIDA GRAFF PRINCIPAL ANALYST
Print Name
Title
(month, day, year)

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

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

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

   Area Code/Phone Number
   (510) 272-3882

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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 04 / 13 / 11
   Description of Event: Golden State Warriors
   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
   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 Nadia Lockyer, District 2
   Name of Individual or Organization: Neal Hickey
   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
   Print Name: PRINCIPAL ANALYST
   Title: (month, day, year)

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

A Public Document

1. Agency Name
COUNTY OF ALAMEDA

Division, Department, or Region (if applicable)

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

Area Code/Phone Number  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

□ Amendment  (Must explain in Part 5.)

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

TICKETS PROVIDED BY
AGENCY REPORT

2. Event For Which Tickets Were Distributed

Date(s) of Event:  07 / 04 / 11  Description of Event: Oakland A's

Face Value of Ticket: $  1500.00

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

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

Number of Tickets Received:  20  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></td>
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<td></td>
</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 Behosting Agency Official:  Supervisor Nadia Lockyer, District 2

Name of Individual or Organization:  Nancy Thomas  Number of Tickets:  20

Description of Organization:  Tri-Cities League of Volunteers

Address of Organization:  36120 Ruschin Drive, Newark CA 94560

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.

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.)

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

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

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

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

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

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

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

**Date Stamp**

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

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

<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>05 / 14 / 11</td>
<td>Oakland A's game</td>
<td>$38.00</td>
</tr>
</tbody>
</table>

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

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

**Number of Tickets Received:**
- 2

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

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

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

<table>
<thead>
<tr>
<th>Name of Receiving Individual or Organization:</th>
<th>Number of Tickets:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cathy Pauley</td>
<td>2</td>
</tr>
</tbody>
</table>

**Description of Organization:**

**Address of Organization:**

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

**Purpose for Distribution:**
- 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

**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)

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

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

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

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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 06/14/11
   Description of Event: Oakland A's
   Face Value of Ticket: $1500.00

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

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

   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)

   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 Nadia Lockyer, District 2

   Name of Individual or Organization: Fred Vinciguerra
   Number of Tickets: 20

   Description of Organization: Hayward Education Foundation

   Address of Organization: P.O. Box 56444 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.

   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.)
   4 PARKING PASSES

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

**Agency Report**

A Public Document

**1. Agency Name**

COUNTY OF ALAMEDA

Division, Department, or Region (if applicable)

1221 OAK STREET, #555

Street Address

OAKLAND, CA 94612

Area Code/Phone Number

(510) 272-3882

**E-mail**

crystal.hishida@acgov.org

**Agency Contact** (name and title)

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

**Date Stamp**

**California Form 802** (For Official Use Only)

□ Amendment (Must explain in Part 5)

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

---

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

Date(s) of Event: **04 / 19 / 11**

Description of Event: Baseball Game

Face Value of Ticket: $38.00

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

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

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

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

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

Name of Individual or Organization: Kamika Dunlap & Amy Fitzgerald

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

**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 - Field Tickets
Tickets Provided by
Agency Report

1. Agency Name

COUNTY OF ALAMEDA

Division, Department, or Region (if applicable)

Street Address

1221 OAK STREET, #555, OAKLAND, CA 94612

Area Code/Phone Number  
(510) 272-3882

E-mail  
crystal.hishida@acgov.org

Agency Contact (name and title)

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

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

2. Event For Which Tickets Were Distributed

Date(s) of Event:  
04/30/11

Description of Event:  
Oakland A's game

Face Value of Ticket: $  
38.00

Agency Event:  
☐ Yes  ☒ No

Identify source of tickets below.

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

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>
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</table>

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

Name of Behesting Agency Official:  
Supervisor Wilma Chan, District 3

Name of Individual or Organization:  
Don Castain

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 sales

5. Verification

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

Signature of Agency Head or Designee  
CRISTAL HISHIDA GRAFF

Print Name  
PRINCIPAL ANALYST

Title  
4/20/11

(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: 05 / 17 / 11
   Description of Event: A's seat tickets
   06 / 28 / 11
   Face Value of Ticket: $ 38.00
   Agency Event ☑ Yes ☐ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Oakland Athletics
   Number of Tickets Received: 4
   Ticket(s) Provided to Agency: ☑ Gratuitously ☐ Pursuant to Contract

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

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

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: Alameda County Supervisor Scott Haggerty, District 1
   Name of Individual or Organization: Assistance League
   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 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
   (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
1. Agency Name  
COUNTY OF ALAMEDA  
Division, Department, or Region (if applicable)  
1221 OAK STREET, #555  
Street Address  
OAKLAND, CA 94612  
Area Code/Phone Number  
(510) 272-3882  
E-mail  
crystal.hishida@acgov.org  
Agency Contact (name and title)  
Crystal Hishida Graff, Principal Analyst, County Administrator's Office

2. Event For Which Tickets Were Distributed  
Date(s) of Event: 07/03/11  
Description of Event: Oakland A's Skybox  
Face Value of Ticket: $1,500  
Agency Event Yes  
No (Identify source of tickets below.)  
Name of Outside Source of Ticket(s) Provided to Agency: Oakland Athletics  
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>
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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: Washington Hospital  
Number of Tickets: 20  
Description of Organization: Hospital  
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 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 and Print Name]  
CRYSTAL HISHIDA GRAFF  
PRINCIPAL ANALYST  
(month, day, year)  
Comment: (Use this space or an attachment for any additional information including amendment explanation.)  
4 PARKING PASSES
**Tickets Provided by Agency Report**

**1. Agency Name**
COUNTY OF ALAMEDA

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

**Street Address**
OAKLAND, CA 94612

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

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

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

**Date Stamp**

**TICKETS PROVIDED BY AGENCY REPORT**

**California Form 802**

**For Official Use Only**

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

**Date(s) of Event:** 06/28/11

**Description of Event:** Oakland A's vs. Florida Marlins

**Face Value of Ticket:** $43.75

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

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

**Number of Tickets Received:** 4

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

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

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

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

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

**Name of Individual or Organization:** First Place for Youth

**Number of Tickets:** 4

**Description of Organization:** Building a foundation for a life after foster care

**Address of Organization:**
519 - 17th St., Ste. 600
Oakland, CA 94612

**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**

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

**FPPC Form 802 (Feb/09)**

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

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

3. **Event For Which Tickets Were Distributed**
   - **Date(s) of Event:** 04/16/11
   - **Description of Event:** Oakland A's
   - **Face Value of Ticket:** $43.75

4. **Agency Official(s) Receiving Ticket(s)**
   - **Name of Official:** Supervisor Nadia Lockyer, District 2
   - **Number of Tickets:** 5
   - **Description of Organization:**
   - **Address of Organization:**
   - **Purpose for Distribution:** To promote attendance at an event held at a County facility in order to maximize potential County revenue from sales

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

---

**Signature of Agency Head or Designee:**

**Print Name:** CRYSTAL HISHIDA GRAFF

**Title:** PRINCIPAL ANALYST

**Date:** 4/15/11

---

**FPPC Form 802 (Feb/09)**

**FPPC Toll-Free Helpline:** 866/ASK-FFPC (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: 04/06/11
   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

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>Kaplan, Seth</td>
<td>1</td>
<td>To promote attendance at an event held at a County</td>
</tr>
<tr>
<td>Briscoe, Alex</td>
<td>1</td>
<td>facility in order to maximize potential revenue from parking and concession 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:
   Alameda County Supervisor Nate Miley, District 4

   Name of Individual or Organization: ________________________

   Number of Tickets: ________________________

   Description of Organization: ________________________

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

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

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

   Signature of Agency Head or Designee: ________________________
   Print Name: CRYSTAL HISHIDA GRAFF
   Title: PRINCIPAL ANALYST
   (month, day, year): 4/1/11

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

2. **Event For Which Tickets Were Distributed**
   - **Date(s) of Event:** 04 / 30 / 11
   - **Description of Event:** Oakland A's
   - **Face Value of Ticket:** $22.00

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:** Supervisor Nadia Lockyer, District 2
   - **Name of Individual or Organization:** Angelina Rodriguez
   - **Number of Tickets:** 2
   - **Description of Organization:**
   - **Address of Organization:**
   - **Purpose for Distribution:** 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: [Signature]
   - **Print Name:** CRYSTAL HISHIDA GRAFF
   - **Title:** PRINCIPAL ANALYST
   - **Date:** 4/18/11

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

COUNTY OF ALAMEDA

Division, Department, or Region (if applicable)

Street Address

1221 OAK STREET, #555, OAKLAND, CA 94612

Area Code/Phone Number

(510) 272-3882

E-mail

crystal.hishida@acgov.org

Agency Contact (name and title)

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

Date Stamp

California Form 802

TICKETS PROVIDED BY AGENCY REPORT

For Official Use Only

2. Event For Which Tickets Were Distributed

Date(s) of Event: 04 / 20 / 11

Description of Event: Rod Stewart & Stevie Nicks

Face Value of Ticket: $ 173.85

Agency Event

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

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

Number of Tickets Received: 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: Supervisor Nadia Lockyer, District 2

Name of Individual or Organization: Rick Trullinger

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 service to the public

5. Verification

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

Signature of Agency Head or Designee

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 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: 04 / 24 / 11 Description of Event: concert - Lil Wayne
   / / Face Value of Ticket: $ ______________
   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:  □ 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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</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: Max Ellis
   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 service to the public

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

   __________________________  __________________________  __________________________
   Signature of Agency Head or Designee  Print Name  Title
   (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)

FPPC Form 802 (Feb/09)
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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 04 / 15 / 11
   Description of Event: Oakland A's game
   Face Value of Ticket: $38.00

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

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

   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):

   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 Wilma Chan, District 3

   Name of Individual or Organization: Tom McCormick
   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 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
   (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 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: 04/01/11 Description of Event: Oakland A's vs. Seattle Mariners
Face Value of Ticket: $43.75
Agency Event □ Yes ☑ No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: Oakland A's
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>
<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: Keith Carson, Supervisor Fifth District
Name of Individual or Organization: Benito Delgado-Olson 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 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]
CRISTAL HISHIDA GRAFF PRINCIPAL ANALYST (month, day, year)

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

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Tickets Provided by
Agency 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: 04 / 01 / 11 Description of Event: Oakland A's vs. Seattle Mariners

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

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

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

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

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

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

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

Name of Individual or Organization: Amir Arman

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 sponsored event or event held at a County facility in order to maximize revenue.

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.)
Tickets Provided by Agency Report
A Public Document

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

Date Stamp California Form 802
For Official Use Only

2. Event For Which Tickets Were Distributed
Date(s) of Event: 04 / 15 / 11
Description of Event: Baseball Game
Face Value of Ticket: $38.00
Agency Event ☐ Yes ☒ No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: Oakland Athletics
Number of Tickets Received: 1
Ticket(s) Provided to Agency: ☒ Pursuant to Contract

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

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

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4
Name of Individual or Organization: Chris Liong
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 promote attendance at an event held at a County facility in order to maximize potential county revenue from parking and concession sales - Field Tickets

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 4/7/11
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 of Original Filing:**
(month, day, year)

---

**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>04 / 29 / 11</td>
<td>A's seat tickets</td>
<td>$38.00</td>
</tr>
<tr>
<td>05 / 01 / 11</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

**Name ofOutside Source of Ticket(s) Provided to Agency:** Oakland Athletics

**Number of Tickets Received:** 4

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

---

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

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

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

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

- **Name of Individual or Organization:** Stacy Fults

- **Number of Tickets:** 4

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

**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:** CRYSTAL HISHIDA GRAFF

**Title:** PRINCIPAL ANALYST

**Date:** 4/12/14 (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
   1221 OAK STREET, #555
   OAKLAND, CA 94612
   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: 07 / 01 / 11 07 / 05 / 11
   Description of Event: A's seat tickets
   Face Value of Ticket: $38.00
   Agency Event: ☑ Yes ☑ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Oakland Athletics
   Number of Tickets Received: 4
   Ticket(s) Provided to Agency: ☑ Gratuitously ☑ Pursuant to Contract

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

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: Alameda County Supervisor Scott Haggerty, District 1
   Name of Individual or Organization: Livermore-Granada Boosters
   Number of Tickets: 4
   Description of Organization: support Livermore high school athletics and offer scholarships
   Address of Organization: 2117 Fourth Street, Livermore, CA 94550
   Purpose for Distribution: To reward a school 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 19944.1.
   Signature of Agency Head or Designee: [Signature]
   Print Name: CRYSTAL HISHIDA GRAFF
   PRINCIPAL ANALYST
   Title
   Date of Filing: 01/20/XX
   (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by
Agency Report

1. Agency Name
   COUNTY OF ALAMEDA

   Division, Department, or Region (if applicable)

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

   Area Code/Phone Number   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: 04 / 30 / 11
   Description of Event: Oakland A's game
   Face Value of Ticket: $43.75

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

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

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

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

   Name of Behesting Agency Official: Supervisor Wilma Chan, District 3

   Name of Individual or Organization: The Academy of Alameda Middle School
   Number of Tickets: 20

   Description of Organization: Middle school for grades 6-8

   Address of Organization: 401 Pacific Avenue, Alameda, CA 94501
   Number and Street: 401 Pacific Avenue
   City: Alameda
   State: CA
   Zip Code: 94501

   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   To reward a school 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

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

   4/19/11

California Form 802
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FPPC Form 802 (Feb/09)
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   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: 04 / 16 / 11
   Description of Event: Oakland A's vs. Detroit Tigers
   Face Value of Ticket: $38.00
   Agency Event  [ ] Yes  [ ] No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Oakland A's
   Number of Tickets Received: 2
   Ticket(s) Provided to Agency: [ ] Gratuitously  [ ] Pursuant to Contract

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

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
<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>1</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: Adrian Henderson
   Number of Tickets: 1
   Description of Organization: 
   Address of Organization: 
   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
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)
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COUNTY OF ALAMEDA

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(510) 272-3882

E-mail
crystal.hishida@acgov.org

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

Date Stamp

California Form 802
For Official Use Only

Amdment (Must explain in Part 5.)

Date of Original Filing: ___/___/____ (month, day, year)

2. Event For Which Tickets Were Distributed

Date(s) of Event: 05/15/11

Description of Event: Oakland A's vs. Los Angeles Angels

Face Value of Ticket: $43.75

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

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

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

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

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

Name of Individual or Organization: Center for Early Intervention on Deafness

Number of Tickets: 8

Description of Organization: Non-profit school for the infant deaf.

Address of Organization: 1035 Greyson St. Berkeley, CA 94710

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
To reward a school or nonprofit organization for its contributions to the community

5. Verification

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

CRystal Hishida Graff  PRINCIPAL ANALYST
Print Name  Title

Signature of Agency Head or Designee  (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: 04 / 01 / 11
   Description of Event: A's Game
   Face Value of Ticket: $38.00
   Agency Event: No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Oakland A's
   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</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>Haggerty, Scott Ala. Co. Supervisor, Dist. 1</td>
<td>4</td>
<td>To obtain oversight of events that have received co. funds</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: ___________________________ Number of Tickets: ________
   Description of Organization: ___________________________
   Address of Organization: ___________________________
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.
   Signature of Agency Head or Designee: ___________________________
   Print Name: CRYSTAL HISHIDA GRAFF
   Title: PRINCIPAL ANALYST
   (month, day, year) 1/1/11
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by Agency Report
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   Area Code/Phone Number    E-mail
   (510) 272-3882            crystal.hishida@acgov.org

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

2. Event For Which Tickets Were Distributed
   Date(s) of Event:  04 / 17 / 11  Description of Event: Oakland A's game
   Face Value of Ticket: $38.00

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

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

   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: Supervisor Wilma Chan, District 3

   Name of Individual or Organization: Tom McCormick

   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 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
   (month, day, year)

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

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

Area Code/Phone Number 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: 04 / 24 / 11 Description of Event: Lil Wayne Concert

Face Value of Ticket: $ 142.95

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: 4 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>
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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 Nadia Lockyer, District 2

Name of Individual or Organization: Kenny Archuleta 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 [Signature] CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST
Print Name Title

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

4/22/11 (month, day, year)
Tickets Provided by
Agency Report

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

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

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

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

Date Stamp

Check Box
[ ] Amendment (Must explain in Part 5.)

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

2. Event For Which Tickets Were Distributed

Date(s) of Event: 04 / 15 / 11 Description of Event: Oakland A's

Face Value of Ticket: $38.00

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

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

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

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

<table>
<thead>
<tr>
<th>Name of Official (last, first)</th>
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</table>

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

Name of Behesting Agency Official: Supervisor Nadia Lockyer, District 2

Name of Individual or Organization: Justin Archuleta 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

5. Verification

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

Signature of Agency Head or Designee: ___________________________ 

Print Name: CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST ___________________________ 

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

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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: 06 / 28 / 11
Description of Event: Oakland A's vs. Florida Marlins
Face Value of Ticket: $43.75

Agency Event □ Yes □ No
(Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: Oakland A's

Number of Tickets Received: 4
Ticket(s) Provided to Agency: □ Gratefully □ 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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<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: Alameda County Health Care Foundation
Number of Tickets: 4
Description of Organization: Support the service and mission of the Alameda County Medical Center
Address of Organization: 2001 Broadway, Suite M Oakland, CA 94612
Purpose for Distribution: To reward a school or nonprofit organization for its contributions to the community.

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

Signature of Agency Head or Designee: CRYSTAL HISHIDA GRAFF
Print Name: PRINCIPAL ANALYST
Title: (month, day, year)

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

1. Agency Name
COUNTY OF ALAMEDA

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

Street Address
OAKLAND, CA 94612

Area Code/Phone Number
(510) 272-3882

E-mail
crystal.hishida@acgov.org

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

2. Event For Which Tickets Were Distributed
Date(s) of Event: 04 / 19 / 11

Description of Event: Oakland A's vs. Boston Red Sox

Face Value of Ticket: $43.75

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

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

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: Keith Carson, Supervisor Fifth District

Name of Individual or Organization: Chris Leung  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.

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)
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: 05/01/11
Description of Event: Oakland A's vs. Texas Rangers
Face Value of Ticket: $43.75

Agency Event: No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: Oakland A's
Number of Tickets Received: 10
Ticket(s) Provided to Agency: Pursuant to Contract

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

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

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District
Name of Individual or Organization: West Berkeley Senior Center
Number of Tickets: 10
Description of Organization: Senior Service Center
Address of Organization: 1900 6th Street Berkeley CA 94710

Purpose for Distribution: To reward a school or nonprofit organization for its contributions to the community

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

Signature of Agency Head or Designee: Crystal Hishida Graff
Print Name: PRINCIPAL ANALYST
Title: 04/20/11

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

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

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

Area Code/Phone Number 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: 04 / 16 / 11 Description of Event: Oakland A's Game

Face Value of Ticket: $ 43.75

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

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

Number of Tickets Received: 3 Ticket(s) Provided to Agency: □ Gratuitously □ Pursuant to Contract

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

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

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

Name of Behesting Agency Official: Supervisor Nadia Lockyer, District 2

Name of Individual or Organization: Ron Carino 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 reward a community volunteer for his service to the public

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

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

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

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

   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: 04 / 01 / 11  Description of Event: Oakland A's

   Face Value of Ticket: $38.00

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

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

   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>Briones, Ruben</td>
<td>2</td>
<td>To promote attendance at an event held at a county facility in order to maximize potential County revenue from 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 Nadia Lockyer, District 2

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

   Description of Organization: ____________________________

   Address of Organization: ____________________________

   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   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  Print Name  Title
   Crystal Hishida Graff  Principal Analyst

   (month, day, year)

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

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

1. Agency Name
   COUNTY OF ALAMEDA
   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: 05 / 19 / 11 07 / 04 / 11
   Description of Event: A's seat tickets
   Face Value of Ticket: $38.00
   Agency Event □ Yes ✓ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Oakland Athletics
   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)

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: Stacy Fults
   Number of Tickets: 4
   Description of Organization:
   Address of Organization: Number and Street
   City State Zip Code
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   To reward a community volunteer for her service to the public

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.
   Signature of Agency Head or Designee CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST
   Date 11 / 12 / 11
   (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by Agency Report  
A Public Document

1. Agency Name
COUNTY OF ALAMEDA

Division, Department, or Region (if applicable)

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

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

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

Date Stamp

2. Event For Which Tickets Were Distributed

Date(s) of Event: 05 / 31 / 11 
Description of Event: Oakland A's game

Face Value of Ticket: $38.00

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

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

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 Behesting Agency Official: Supervisor Wilma Chan, District 3

Name of Individual or Organization: Steve Lazare  
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 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.

______________________________  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.)

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
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: 04/24/11  
Description of Event: Lil' Wayne  
Face Value of Ticket: $142.95

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

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

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

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

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

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

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

Name of Individual or Organization: Sharifa Williams  
Number of Tickets: 2

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  
PRINCIPAL ANALYST  
Date: 4/20/11

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

FPPC Form 802 (Feb/99)
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: 04/20/11
   Description of Event: Rod Stewart & Stevie Knicks
   Face Value of Ticket: $173.85
   Agency Event □ Yes ☒ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 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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</tr>
</tbody>
</table>

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

   Name of Behesting Agency Officer: Keith Carson, Supervisor Fifth District
   Name of Individual or Organization: Maria Carson
   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.

   Signature of Agency Head or Designee
   CRYSTAL HISHIDA GRAFF
   Print Name
   PRINCIPAL ANALYST
   Title
   (month, day, year)

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

A Public Document

1. Agency Name
   COUNTY OF ALAMEDA

   Division, Department, or Region (if applicable)

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

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

   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: Oakland A's Game
   Face Value of Ticket: $38.00

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

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

   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)

   Name of Official (Last, First)   Number of Tickets

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

   Name of Behesting Agency Official: Supervisor Nadia Lockyer, District 2

   Name of Individual or Organization: Nick Leonardo
   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 student for outstanding scholastic achievement

5. Verification

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

   Signature of Agency Head or Designee

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

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

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

A Public Document

1. Agency Name
COUNTY OF ALAMEDA
Division, Department, or Region (If applicable)
1221 OAK STREET, #555
Street Address
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: 07 / 15 / 11
Description of Event: Oakland A's Skybox
Face Value of Ticket: $1,500
Agency Event □ Yes  □ No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency:
Oakland Athletics
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)

Name of Official
(Number and 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:
Kidango
Number of Tickets: 20
Description of Organization:
Children's Center
Address of Organization:
114000 Old Warm Springs Blvd, Fremont, CA 94538
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.

Signature of Agency Head or Designee
CRystal Hishida Graff
PRINCIPAL ANALYST

(print name)

(month, day, year)

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

FPPC Form 802 (Feb/99)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Tickets Provided by
Agency Report

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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: 04/16/11
   Description of Event: Baseball Game
   Face Value of Ticket: $38.00
   Agency Event □ Yes □ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Oakland Athletics
   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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<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: United Seniors of Oakland & Alameda County
   Number of Tickets: 2
   Description of Organization: Senior Advocacy
   Address of Organization: 7200 Bancroft Ave, Ste 251 - Oakland, CA 94605
   Number and Street: 7200 Bancroft Ave
   City: Oakland
   State: CA
   Zip Code: 94605
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   To motivate and provide expanded opportunities to vulnerable populations in the County such as seniors.

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

   Signature of Agency Head or Designee
   CRYSTAL HISHIDA GRAFF
   PRINCIPAL ANALYST
   Print Name
   Title
   Date: 4/7/11
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)

PLAZA SEATS

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

1. Agency Name
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   Street Address
   1221 OAK STREET, #555, OAKLAND, CA 94612

   Area Code/Phone Number 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: 04 / 20 / 11
   Description of Event: Oakland A's
   Face Value of Ticket: $ 43.75

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

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

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

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)
   Name of Official (Last, First) Number of Tickets State Whether the Distribution is Income to the Official or
   Gasparac, Christine 1 To encourage staff development

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

   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 encourage staff development

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

   Signature of Agency Head or Designee CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST
   Print Name Title

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

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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
crystal.hishida@acgov.org

Agency Contact (name and title)

Crysta! Hishida Graff, Principal Analyst, County Administrator's Office

2. Event For Which Tickets Were Distributed

Date(s) of Event: 04 / 30 / 11

Description of Event: Baseball Game

Face Value of Ticket: $38.00

Agency Event

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

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

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>
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<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
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</thead>
<tbody>
<tr>
<td>Miley, Christopher</td>
<td>1</td>
<td>To promote attendance at an event held at a County facility in order to maximize potential county revenue from parking and concession 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: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: Neal Hickey

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 promote attendance at an event held at a County facility in order to maximize potential county revenue from parking and concession sales.

5. Verification

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

[Signature of Agency Head or Designee]

CRYSTAL HISHIDA GRAFF  PRINCIPAL ANALYST

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

and concession sales - Field Tickets
1. Agency Name
COUNTY OF ALAMEDA

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

Street Address
OAKLAND, CA 94612

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

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

Date Stamp
California Form 802
For Official Use Only

2. Event For Which Tickets Were Distributed
Date(s) of Event: 04 / 15 / 11 Description of Event: Baseball Game
Face Value of Ticket: $38.00

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

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

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

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

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<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: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: Milton Ma Number of Tickets: 1

Description of Organization:

Address of Organization: Number and Street City State Zip Code

Purpose for Distribution: 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 PRINCIPAL ANALYST
Print Name Title

Comment: (Use this space or an attachment for any additional information including amendment explanation.) and concession sales - Field Tickets
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

Date of Original Filing: __/__/____ (month, day, year)

2. Event For Which Tickets Were Distributed
Date(s) of Event: 04/03/11
Description of Event: Oakland A's Game
Face Value of Ticket: $38.00

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

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

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>Kerr, Mary</td>
<td>2</td>
<td>To reward a County employee for her exemplary service</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 Nadia Lockyer, District 2

Name of Individual or Organization: Mary Kerr
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 County employee for her exemplary service to the public

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

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.)
Tickets Provided by
Agency Report
A Public Document

1. Agency Name
COUNTY OF ALAMEDA

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1221 OAK STREET, #555, OAKLAND, CA 94612

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(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: 03 / 29 / 11 Description of Event: Oakland A's Game

Face Value of Ticket: $ 43.75

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

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

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
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 Nadia Lockyer, District 2

Name of Individual or Organization: Rick Trullinger 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 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

(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)**

**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**

<table>
<thead>
<tr>
<th>Date(s) of Event:</th>
<th>08 / 20 / 11</th>
</tr>
</thead>
<tbody>
<tr>
<td>Description of Event:</td>
<td>Oakland A's Game</td>
</tr>
<tr>
<td>Face Value of Ticket:</td>
<td>$ 43.75</td>
</tr>
</tbody>
</table>

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

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

**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>
</table>

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

**Name of Behesting Agency Official:** Supervisors Nadia Lockyer, District 2

**Name of Individual or Organization:** Steve Morlin

**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.

CRystal Hishida Graff  PRINCIPAL ANALYST  11/7/11

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

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

Street Address
1221 OAK STREET, #555, OAKLAND, CA 94612
Area Code/Phone Number 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: 04 / 20 / 11 Description of Event: Oakland A's Face Value of Ticket: $ 43.75
Agency Event □ Yes □ No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: Oakland A's
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>Basocci-Villarreal, Anissa</td>
<td>1</td>
<td>To encourage staff development</td>
</tr>
</tbody>
</table>

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

Name of Behesping Agency Official: Supervisor Nadia Lockyer, District 2

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 encourage staff development

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

Signature of Agency Head or Designee
CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST
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)
Ticks Provided by Agency Report

1. Agency Name
   COUNTY OF ALAMEDA
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   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: 04 / 20 / 11  Description of Event: Oakland A's
   Face Value of Ticket: $ 43.75

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

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

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

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

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>DeMartini, Ginny</td>
<td>1</td>
<td>To encourage staff development</td>
</tr>
</tbody>
</table>

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

   Name of Behesling Agency Official: Supervisor Nadia Lockyer, District 2

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

   Description of Organization: ____________________________

   Address of Organization: ____________________________

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

5. Verification

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

   Signature of Agency Head or Designee  PRINT NAME  PRINCIPAL ANALYST  (month, day, year)

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

A Public Document

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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: 05 / 28 / 11 Description of Event: Oakland A’s Face Value of Ticket: $ 38.00

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

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

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>
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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 Nadia Lockyer, District 2

Name of Individual or Organization: New Haven Education Foundation

Number of Tickets: 2

Description of Organization: To promote community involvement for the funding of educational enrichment

Address of Organization: 33377 Western Ave. Union City, CA 94587

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

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

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

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

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

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

Date Stamp

Date of Original Filing:

(month, day, year)

2. Event For Which Tickets Were Distributed

Date(s) of Event: 03 / 29 / 11 Description of Event: Oakland A’s game

Face Value of Ticket: $ $85.00/$40.00

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

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

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

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

<table>
<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>
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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 Wilma Chan, District 3

Name of Individual or Organization: Ricardo Reyes Number of Tickets: 6

Description of Organization:

Address of Organization: Number and Street City State Zip Code

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

To promote attendance at an event held at a County facility in order to maximize 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.

CRystal Hishida Graff PRINCIPAL ANALYST

Date: 3/12/11 (month, day, year)

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

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

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

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

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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 04 / 16 / 11
   Description of Event: Oakland A's
   __________ / __________ / __________
   Face Value of Ticket: $ 43.75

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

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

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

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

   Name of Official
   (Last, First)

   Number of Tickets

   State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

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

   Name of Behesting Agency Official: Supervisor Nadia Lockyer, District 2

   Name of Individual or Organization:
   Ujima Learning Center

   Number of Tickets: 4

   Description of Organization:
   Provides after school tutoring program to Title One students

   Address of Organization:
   310 Kauai Circle, Union City CA 94587

   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 or Designee: [Signature]
   Print Name: CRYSTAL HISHIDA GRAFF
   PRINCIPAL ANALYST

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

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

**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:** 04/06/11
   - **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:** 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>
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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:** Clarence Hunt
   - **Number of Tickets:** 2
   - **Description of Organization:**
     - 
   - **Address of Organization:**
     - Number and Street
     - City
     - State
     - Zip Code
   - **Purpose for Distribution:** 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:**
   - **Print Name:** CRYSTAL HISHIDA GRAFF
   - **Title:** PRINCIPAL ANALYST
   - **Date of Filing:** 4/5/11
   - **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

### 2. Event For Which Tickets Were Distributed

<table>
<thead>
<tr>
<th>Date(s) of Event:</th>
<th>05 / 28 / 11</th>
</tr>
</thead>
</table>

**Description of Event:** Oakland A's vs. Baltimore Orioles

**Face Value of Ticket:** $43.75

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

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

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

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

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

**Name of Individual or Organization:** Kim Gillette - Daily City Youth Health Center

**Number of Tickets:** 4

**Description of Organization:**

**Address of Organization:**

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

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

To 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**

**Date**

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

---

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

   **Street Address**
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   - (510) 272-3882

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

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

2. **Event For Which Tickets Were Distributed**
   **Date(s) of Event:** 04 / 20 / 11  
   **Description of Event:** Oakland A's  
   **Face Value of Ticket:** $22.00

   **Agency Event**
   - Yes

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

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

   **Name of Individual or Organization:** Gordon Bonneville

   **Number of Tickets:** 2

   **Description of Organization:**
   
   **Address of Organization:**
   
   **Purpose for Distribution:** Describe the public purpose for the distribution to the organization.

   To promote attendance at 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**
   
   **Print Name**
   - CRYSTAL HISHIDA GRAFF

   **Title**
   - PRINCIPAL ANALYST

   **(month, day, year)**

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

---

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

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: 04 / 20 / 11
   Description of Event: Oakland A's vs. Boston Red Sox
   / / Face Value of Ticket: $38.00
   Agency Event Yes No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Oakland A's
   Number of Tickets Received: 2
   Ticket(s) Provided to Agency: GRATUITOUSLY PRINCIPAL ANALYST

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>
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<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: Keith Carson, Supervisor Fifth District
   Name of Individual or Organization: Scott Spencer
   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.

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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 04 / 06 / 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: □ Gratuiously ☑ 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: James Kennedy & Zheena Krikorintz
   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)
### 1. Agency Name
COUNTY OF ALAMEDA

### 2. Event For Which Tickets Were Distributed
Date(s) of Event: 04 / 20 / 11
Description of Event: Oakland A's

Face Value of Ticket: $ 43.75

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

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dianda, Michelle</td>
<td>1</td>
<td>To encourage staff development</td>
</tr>
</tbody>
</table>

### 4. Individual or Organization Receiving Ticket(s)
Name of Behesting Agency Official: Supervisor Nadia Lockyer, District 2

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 encourage staff development

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

Signature of Agency Head or Designee: ___________________________

CRystal Hishida GraFF

Print Name: ___________________________

Principal Analyst: ___________________________

Title: ___________________________

Date of Original Filing: ___________

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

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

   **Street Address**
   
   OAKLAND, CA 94612

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

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

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

   **Date Stamp**
   
   California Form 802

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

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

   **Date(s) of Event:**
   
   04 / 30 / 11

   **Description of Event:**
   
   A's seat tickets

   05 / 05 / 11

   **Face Value of Ticket:**
   
   $38.00

   **Agency Event:**
   
   [ ] Yes
   
   [x] No (Identify source of tickets below.)

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

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

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

   (Provided at the behest of an agency official.)

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

   **Name of Individual or Organization:**
   
   Citizens for Better Community (CBC)

   **Number of Tickets:**
   
   4

   **Description of Organization:**
   
   Initiate/sponsor health, educational, community involvement events for Chinese Americans

   **Address of Organization:**
   
   PO Box 1, Fremont, CA 94537-0001

   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.

   [Signature of Agency Head or Designee]

   CRYSTAL HISHIDA GRAFF

   PRINCIPAL ANALYST

   (month, day, year)

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

   FPPC Form 802 (Feb/09)

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

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

2. Event For Which Tickets Were Distributed
Date(s) of Event: 05 / 16 / 11 Description of Event: Oakland A's
Face Value of Ticket: $1500.00
Agency Event □ Yes ☒ No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: Oakland A's
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>
</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
Name of Behesping Agency Official: Supervisor Nadia Lockyer, District 2
Name of Individual or Organization: Hispanic Community Affairs Council
Number of Tickets: 20
Description of Organization: Hispanic Community Affairs Council
Address of Organization: P.O. Box 3151 Hayward, CA 94540
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.

[- 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.)

4 PARKING PASSES
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

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

2. Event For Which Tickets Were Distributed
Date(s) of Event: 04 / 17 / 11 Description of Event: Baseball Game

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

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

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>
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<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: United Seniors of Oakland & Alameda County

Number of Tickets: 2

Description of Organization: Senior Advocacy

Address of Organization: 7200 Bancroft Ave, Ste 251 - Oakland, CA 94605

Purpose for Distribution: To motivate and provide expanded opportunities to vulnerable populations in the County such as seniors.

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

Signature of Agency Head or Designee
CRISTAL HISHIDA GRAFF
PRINCIPAL ANALYST

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

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. Event For Which Tickets Were Distributed
   Date(s) of Event: 04 / 20 / 11
   Description of Event: Stevie Nicks & Rod Stewart concert
   Face Value of Ticket: $173.85
   Agency Event: ☑ Yes  ☐ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 2
   Ticket(s) Provided to Agency: ☑ Pursuant to Contract  ☐ Gratuitously

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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</thead>
</table>

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

   Name of Behesting Agency Official: Supervisor Wilma Chan, District 3
   Name of Individual or Organization: Katherine Bowerman  Number of Tickets: 2
   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: [Signature]
   Print Name: CRYSTAL HISHIDA GRAFF
   Title: PRINCIPAL ANALYST
   Date: 04/13/11

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

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

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

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

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

2. Event For Which Tickets Were Distributed
Date(s) of Event: 06/19/11 Description of Event: Oakland A's game

Face Value of Ticket: $38.00

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

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

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>
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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 Wilma Chan, District 3

Name of Individual or Organization: Nicholas Portolese 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 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.

CRISTAL 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 (510) 272-3882
   E-mail crystal.hishida@acgov.org
   Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 03/14/11 03/17/11
   Description of Event: Oakland A's vs. Detroit Tigers
   Face Value of Ticket: $38.00
   Agency Event ☐ Yes ☒ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Oakland A's
   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></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

   Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District
   Name of Individual or Organization: Socially Responsible Network
   Number of Tickets: 4
   Description of Organization: Provide resources, technical assistance, legislative information, and facilitate networking
   Address of Organization: 360 Grand Ave. #57, Oakland, CA 94610
   Purpose for Distribution: To reward a school or nonprofit organization for its contributions to the community

5. Verification

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

   Signature of Agency Head or Designee: 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 (name and title)

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

Date Stamp

California Form 802

For Official Use Only

[Blank]

Amendment (Must explain in Part 5.)

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

2. Event For Which Tickets Were Distributed

Date(s) of Event: 03/29/11

Description of Event: Oakland A's vs. San Francisco Giants

Face Value of Ticket: $38.00

Agency Event

☐ Yes

☒ No (Identify source of tickets below.)

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

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>Shrago, Amy</td>
<td>1</td>
<td>To evaluate the ability of a local sports team to attract busRSA</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: Ethan Shrago

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 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

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)
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Agency Report

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COUNTY OF ALAMEDA

Division, Department, or Region (if applicable)

Street Address
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Area Code/Phone Number
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E-mail
crystal.hishida@acgov.org

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

Date Stamp

California Form 802
For Official Use Only

☐ Amendment (Must explain in Part 5.)

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

2. Event For Which Tickets Were Distributed

Date(s) of Event: 06 / 19 / 11

Description of Event: Oakland A's Game

Face Value of Ticket: $ 22.00

Agency Event

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

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

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>
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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 Nadia Lockyer, District 2

Name of Individual or Organization: Volunteer Hayward

Number of Tickets: 2

Description of Organization: Volunteers that work and help make the District a resource by enriching the community

Address of Organization:
1099 E Street, Hayward CA 94541

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 provisos of FPPC Regulation 18944.1.

Signature of Agency Header or Designee

CRYSTAL HISHIDA GRAFF

Print Name

PRINCIPAL ANALYST

Title

(month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
1. Agency Name
COUNTY OF ALAMEDA
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Area Code/Phone Number E-mail
(510) 272-3882 crystal.hishida@acgov.org

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

2. Event For Which Tickets Were Distributed
Date(s) of Event: 04 / 01 / 11 Description of Event: Oakland A's Game
Face Value of Ticket: $ 43.75

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

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

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

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

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lockyer, Nadia</td>
<td>4</td>
<td>Promote attendance at County facility to maximize revenue</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 Nadia Lockyer, District 2

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 a County facility in order to maximize potential County revenue from parking and sales

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

Signature of Agency Head or Designee: ___________________________ Print Name: Crystal Hishida Graff

Principal Analyst: ___________________________ Title: Principal Analyst

Date: 06/11 (month, day, year)

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

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

   **Street Address**
   OAKLAND, CA 94612

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

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

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

2. **Event For Which Tickets Were Distributed**
   **Date(s) of Event:** 08 / 14 / 11
   **Description of Event:** A's Skybox
   **Face Value of Ticket:** $1,500

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

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

   **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>
</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 SCOTT HAGGERTY, DISTRICT ONE

   **Name of Individual or Organization:** ALAMEDA COUNTY FAMILY JUSTICE CENTE
   **Number of Tickets:** 20

   **Description of Organization:** NON-PROFIT LEGAL SERVICES FOR DOMESTIC VIOLENCE & ASSAULT, ETC

   **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 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):** 4/15/11

   **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: 05/15/11
   Description of Event: Oakland A's vs. Los Angeles Angels
   Face Value of Ticket: $43.75
   Agency Event: No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Oakland A's
   Number of Tickets Received: 10
   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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<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District
   Name of Individual or Organization: SAGE Scholars
   Number of Tickets: 10
   Description of Organization: Provide professional leadership training and career development research.
   Address of Organization: 2223 Fulton Street, #327 Berkeley CA 94702
   Purpose for Distribution: To reward a school or nonprofit organization for its contributions to the community

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.
   Signature of Agency Head or Designee CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST
   Date Stamp (month, day, year) 4/20/11
   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: 04/19/11 Description of Event: Oakland A’s vs. Boston Red Sox
   Face Value of Ticket: $38.00
   Agency Event □ Yes ☒ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Oakland A’s
   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>Greene, Hannah</td>
<td></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
   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
   ____________________________
   PRINCIPAL ANALYST Print Name
   ____________________________
   Title
   ____________________________
   (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
1. Agency Name
   COUNTY OF ALAMEDA

   Division, Department, or Region (if applicable)

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

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

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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 04/16/11
   Description of Event: Oakland A's Game
   Face Value of Ticket: $43.75

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

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

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

   Name of Behesting Agency Official: Supervisor Nadia Lockyer, District 2

   Name of Individual or Organization: Volunteer Hayward
   Number of Tickets: 4

   Description of Organization: Volunteers that work and help make the District a resource by enriching the community

   Address of Organization: 1099 E Street, Hayward CA 94541
   Number and Street: 1099 E 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: [Signature]
   Print Name: CRYSTAL HISHIDA GRAFF
   Title: PRINCIPAL ANALYST
   Date: 05/11
   (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)