Agency Report of:
Ceremonial Role Events and
Ticket/Admission Distributions

1. Agency Name
COUNTY OF ALAMEDA
Division, Department, or Region (if applicable)
BOARD OF SUPERVISORS
Street Address
1221 OAK STREET, SUITE 536
Designated Agency Contact (Name, Title)
Crystal Hishida Graff, Clerk, Board of Supervisors
Area Code/Phone Number E-mail
(510) 272-3882 crystal.hishida@acgov.org

2. Function, Event, or Ceremonial Role Information
Title Oakland A's game
Description Baseball
Face Value of Each Admission $ 1,500
Date(s) 05/27/12
Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☐ If no: __________________________ Name of Source
Was the distribution to persons identified below made at the behest of an agency official?
Yes ☐ No ☐ If yes: SUPERVISOR SCOTT HAGGERTY, DISTRICT 1 Official's Name (Last, First) and Title
The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>LAS POSITAS COLLEGE</td>
<td>20</td>
<td>Yes ☐ No ☑</td>
<td>TO REWARD A SCHOOL OR NONPROFIT ORGANIZATION FOR ITS CONTRIBUTIONS TO THE COMMUNITY</td>
</tr>
<tr>
<td>3000 Campus Hill Drive Livermore, CA</td>
<td></td>
<td>Yes ☐ No ☑</td>
<td>Income</td>
</tr>
<tr>
<td>94551-7623</td>
<td></td>
<td>Yes ☐ No ☑</td>
<td>Income</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☑</td>
<td>Income</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☑</td>
<td>Income</td>
</tr>
</tbody>
</table>

3. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

Signature of Agency Head or Designee: ________________________  Print Name: Lee Ann Fergerson  Title: Ticket Administrator  3/29/12 (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Agency Report of:
Ceremonial Role Events and Ticket/Admission Distributions

1. Agency Name
   COUNTY OF ALAMEDA
   Division, Department, or Region (if applicable)
   BOARD OF SUPERVISORS
   Street Address
   1221 OAK STREET, SUITE 536
   Designated Agency Contact (Name, Title)
   Crystal Hishida Graff, Clerk, Board of Supervisors
   Area Code/Phone Number
   (510) 272-3882
   E-mail
   crystal.hishida@acgov.org

2. Function, Event, or Ceremonial Role Information
   Title GSW
   Description BASKETBALL
   Face Value of Each Admission $ 95
   Date(s) 04 / 24 / 12
   Ticket(s)/Admission(s) provided by agency? Yes [ ] No [ ]
   If no: Name of Source

3. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.
   Signature of Agency Head or Designee
   Lee Ann Ferguson
   Ticket Administrator
   3/13/12
   (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Agency Report of:
Ceremonial Role Events and Ticket/Admission Distributions

1. Agency Name
COUNTY OF ALAMEDA
Division, Department, or Region (if applicable)
BOARD OF SUPERVISORS
Street Address
1221 OAK STREET, SUITE 536
Designated Agency Contact (Name, Title)
Crystal Hishida Graff, Clerk, Board of Supervisors
Area Code/Phone Number E-mail
(510) 272-3882 crystal.hishida@acgov.org

2. Function, Event, or Ceremonial Role Information
Title DISNEY ON ICE
Description GSW
Face Value of Each Admission $ 32.10
Date(s) 03 / 04 / 12
Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☐ If no: __________________________ Name of Source
Was the distribution to persons identified below made at the behest of an agency official?
Yes ☐ No ☐ If yes: SUPERVISOR SCOTT HAGGERTY, DISTRICT 1 Official's Name (Last, First) and Title
The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
</tr>
</thead>
<tbody>
<tr>
<td>PAUL LUNA</td>
<td>4</td>
<td>Yes ☐ No ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>TO REWARD A COMMUNITY VOLUNTEER FOR HIS OR HER SERVICE TO THE PUBLIC</td>
</tr>
</tbody>
</table>

3. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

[Signature of Agency Head or Designee] Lee Ann Fergerson
[Print Name] Ticket Administrator
[Title] 03-05-12
(month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Agency Report of:
Ceremonial Role Events and
Ticket/Admission Distributions

1. Agency Name
   COUNTY OF ALAMEDA
   BOARD OF SUPERVISORS

   Street Address
   1221 OAK STREET, SUITE 536

   Designated Agency Contact (Name, Title)
   Crystal Hishida Graff, Clerk, Board of Supervisors

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

   Date Stamp
   California Form 802
   For Official Use Only
   Amendment (Must provide explanation in Part 3.)
   Date of Original Filing: (month, day, year)

2. Function, Event, or Ceremonial Role Information
   Title DISNEY ON ICE
   Face Value of Each Admission $ 32.10
   Description GSW
   Date(s) 03 / 03 / 12

   Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☑
   If no: ____________________________ Name of Source

   Was the distribution to persons identified below made at the behest of an agency official?
   Yes ☐ No ☑
   If yes: ____________________________ Official’s Name (Last, First) and Title

   The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>DEDE DAVIS</td>
<td>4</td>
<td>Yes ☐ No ☑</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>TO REWARD A COMMUNITY VOLUNTEER FOR HIS OR HER SERVICE TO THE PUBLIC</td>
<td>Income ☐</td>
</tr>
</tbody>
</table>

3. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

   Signature of Agency Head or Designee
   Lee Ann Fergerson

   Print Name
   Ticket Administrator
   03-05-12
   (month, day, year)

   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Agency Report of:
Ceremonial Role Events and
Ticket/Admission Distributions

1. Agency Name
County of Alameda
Division, Department, or Region (if applicable)
Board of Supervisors
Street Address
1221 Oak Street, Suite 536
Designated Agency Contact (Name, Title)
Crystal Hishida Graff, Clerk, Board of Supervisors
Area Code/Phone Number E-mail
(510) 272-3882 crystal.hishida@acgov.org

2. Function, Event, or Ceremonial Role Information
Title Disney on Ice
Description Kids Event
Face Value of Each Admission $ 20.35
Date(s) 02 / 29 / 12
Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☑ If no: Golden State Warriors
Was the distribution to persons identified below made at the behest of an agency official?
Yes ☑ No ☐ If yes: Lockyer, Nadia - Supervisor District 2
Official's Name (Last, First) and Title
The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
</tr>
</thead>
<tbody>
<tr>
<td>Apodaca, Ana</td>
<td>2</td>
<td>Yes ☑ No ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>To promote attendance at an event held at a County facility in order to maximize potential revenue from sales.</td>
</tr>
</tbody>
</table>

Income ☐

3. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

MICHELLE DIANDA
Signature of Agency Head or Designee
Print Name
Ticket Administrator
Title

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

FPPC Form 802 (2/11)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Admission Distributions

1. Agency Name
   County of Alameda
   Division, Department, or Region (if applicable)
   Board of Supervisors
   Street Address
   1221 Oak Street, Suite 536
   Designated Agency Contact (Name, Title)
   Crystal Hishida Graff, Clerk, Board of Supervisors
   Area Code/Phone Number
   (510) 272-3882
   E-mail
   crystal.hishida@acgov.org

2. Function, Event, or Ceremonial Role Information
   Title
   Disney on Ice
   Description
   Kids Event
   Face Value of Each Admission
   $32.10
   Date(s)
   03 / 01 / 12
   Ticket(s)/Admission(s) provided by agency?
   Yes ☐ No ☑
   If no: Golden State Warriors
   Name of Source
   Was the distribution to persons identified below made at the behest of an agency official?
   Yes ☐ No ☑
   If yes: Lockyer, Nadia- Supervisor District 2
   Official's Name (Last, First) and Title
   The identity of recipient(s) and the explanation:

<table>
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<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Johnstone, Andrew</td>
<td>4</td>
<td>Yes ☐ No ☑</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☑</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☑</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☑</td>
<td></td>
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<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☑</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☑</td>
<td></td>
</tr>
</tbody>
</table>

3. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

   Signature of Agency Head or Designee: [Signature]
   Print Name: MICHELLE DIANDA
   Title: Ticket Administrator
   Date: 3/1/12

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

FPPC Form 802 (2/11)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Admission Distributions

1. Agency Name

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Division, Department, or Region (if applicable)
Board of Supervisors
Street Address
1221 Oak Street, Suite 536
Designated Agency Contact (Name, Title)
Crystal Hishida Graff, Clerk, Board of Supervisors
Area Code/Phone Number E-mail
(510) 272-3882 crystal.hishida@acgov.org

2. Function, Event, or Ceremonial Role Information

Title Disney on Ice
Description Kids Event
Face Value of Each Admission $ 32.10
Date(s) 03 / 02 / 12

Ticket(s)/Admission(s) provided by agency? Yes [ ] No [ ]
If no: Golden State Warriors
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes [ ] No [ ] If yes: Lockyer, Nadia- Supervisor District 2
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
</tr>
</thead>
<tbody>
<tr>
<td>Watanabe, Makiko</td>
<td>4</td>
<td>Yes [ ] No [ ]</td>
</tr>
</tbody>
</table>

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

Income [ ]

Yes [ ] No [ ]
Income [ ]

Yes [ ] No [ ]
Income [ ]

Yes [ ] No [ ]
Income [ ]

Yes [ ] No [ ]
Income [ ]

3. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

MICHELLE DIANDA
Signature of Agency Head or Designee
Print Name
Ticket Administrator
Title

3/1/12
(month, day, year)

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

FPPC Form 802 (2/11)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Admission Distributions

1. Agency Name
   County of Alameda
   Board of Supervisors
   1221 Oak Street, Suite 536
   Designated Agency Contact (Name, Title)
   Crystal Hishida Graff, Clerk, Board of Supervisors
   Area Code/Phone Number E-mail
   (510) 272-3882 crystal.hishida@acgov.org

2. Function, Event, or Ceremonial Role Information
   Title Disney on Ice
   Description Kids Event
   Face Value of Each Admission $ 32.10
   Date(s) 03 / 03 / 12
   Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☑ If no: Golden State Warriors
   Name of Source
   Was the distribution to persons identified below made at the behest of an agency official?
   Yes ☑ No ☐ If yes: Lockyer, Nadia- Supervisor District 2
   Official's Name (Last, First) and Title
   The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capili, Reggie</td>
<td>4</td>
<td>Yes ☑</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>To reward a community volunteer for his service to the public.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income ☑</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income ☑</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income ☑</td>
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<td></td>
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<td></td>
<td>Income ☑</td>
</tr>
</tbody>
</table>

3. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.
   Signature of Agency Head or Designee MICHELLE DIANDA Ticket Administrator
   Print Name Title
   (month, day, year) 3/11/12

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Agency Name:
County of Alameda
Division, Department, or Region (if applicable)
Board of Supervisors
Street Address:
1221 Oak Street, Suite 536
Designated Agency Contact (Name, Title)
Crystal Hishida Graff, Clerk, Board of Supervisors
Area Code/Phone Number
(510) 272-3882
E-mail
crystal.hishida@acgov.org

2. Function, Event, or Ceremonial Role Information
Title: Disney on Ice
Face Value of Each Admission: $32.10
Date(s): 03 / 04 / 12
Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☐ If no: Golden State Warriors
Was the distribution to persons identified below made at the behest of an agency official?
Yes ☐ No ☐ If yes: Lockyer, Nadia- Supervisor District 2
Official's Name (Last, First) and Title
The identity of recipient(s) and the explanation:

<table>
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<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nevarez, Guillermo</td>
<td>4</td>
<td>Yes ☐ No ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>To reward a community volunteer for his service to the public.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income ☑</td>
</tr>
</tbody>
</table>

3. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

MICHELLE DIANDA
Ticket Administrator
Print Name
Title
Signature of Agency Head or Designee

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

FPPC Form 802 (2/11)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and
Ticket/Admission Distributions

1. Agency Name
   County of Alameda
   Division, Department, or Region (if applicable)
   Board of Supervisors
   Street Address
   1221 Oak Street, Suite 536
   Designated Agency Contact (Name, Title)
   Crystal Hishida Graff, Clerk, Board of Supervisors
   Area Code/Phone Number
   (510) 272-3882
   E-mail
   crystal.hishida@acgov.org

2. Function, Event, or Ceremonial Role Information
   Title
   Face Value of Each Admission $95.00
   Description
   Date(s)
   03/10/12
   Ticket(s)/Admission(s) provided by agency? Yes ☑ No ☐
   If no: Golden State Warriors
   Name of Source
   Was the distribution to persons identified below made at the behest of an agency official?
   Yes ☑ No ☐
   If yes: Lockyer, Nadia- Supervisor, District 2
   Official's Name (Last, First) and Title
   The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hickey, Neal</td>
<td>4</td>
<td>Yes ☑ No ☐</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>To promote attendance at an event held at a County facility in order to maximize potential revenue from sales.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☑ No ☐</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☑ No ☐</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☑ No ☐</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☑ No ☐</td>
<td></td>
</tr>
</tbody>
</table>

3. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.
   Signature of Agency Head or Designee
   MICHELLE DIANDA
   Print Name
   Ticket Administrator
   3/1/12
   (month, day, year)

   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
   Includes 1 parking pass at a value of $18
## Agency Name
County of Alameda

### Division, Department, or Region (if applicable)
Board of Supervisors

### Street Address
1221 Oak Street, Suite 536

### Designated Agency Contact (Name, Title)
Crystal Hishida Graff, Clerk, Board of Supervisors

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

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

## Function, Event, or Ceremonial Role Information

### Title
Golden State Warriors

### Description
Basketball Game

### Face Value of Each Admission
$95.00

### Date(s)
03 / 10 / 12

### Ticket(s)/Admission(s) provided by agency?
Yes [ ] No [x] If no: Golden State Warriors

### Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes [ ] No [x] If yes: Lockyer, Nadia- Supervisor, District 2

Official’s Name (Last, First) and Title

## The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Colbruno, Michael</td>
<td>4</td>
<td>Yes [x] No [ ]</td>
<td>To promote attendance at an event held at a County facility in order to maximize potential revenue from sales. Income</td>
</tr>
</tbody>
</table>

3. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

Signature of Agency Head or Designee

MICHETTE DIANDA

Print Name

Ticket Administrator

Title

(month, day, year)

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

Includes 1 parking pass at a value of $18
Agency Report of:
Ceremonial Role Events and Ticket/Admission Distributions

1. Agency Name
   County of Alameda
   Division, Department, or Region (if applicable)
   Board of Supervisors
   Street Address
   1221 Oak Street, Suite 536
   Designated Agency Contact (Name, Title)
   Crystal Hishida Graff, Clerk, Board of Supervisors
   Area Code/Phone Number
   (510) 272-3882
   E-mail
   crystal.hishida@acgov.org

2. Function, Event, or Ceremonial Role Information
   Title
   Golden State Warriors
   Description
   Basketball Game
   Face Value of Each Admission $ 95.00
   Date(s) 03/10/12
   Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☑ If no: Golden State Warriors
   Name of Source
   Was the distribution to persons identified below made at the behest of an agency official?
   Yes ☑ No ☐ If yes: Lockyer, Nadia- Supervisor, District 2
   Official's Name (Last, First) and Title
   The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name or Organization</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Torres, John</td>
<td>8</td>
<td>Yes ☑ No ☐</td>
<td>To reward a County employee for his exemplary service to the public.</td>
</tr>
</tbody>
</table>

3. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

   MICHELLE DIANDA
   Signature of Agency Head or Designee
   Print Name
   Ticket Administrator
   Title 3/1/12
   (month, day, year)

   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
   Includes 1 parking pass at a value of $18
Agency Name: County of Alameda
Division, Department, or Region (if applicable): Board of Supervisors
Street Address: 1221 Oak Street, Suite 536
Designated Agency Contact (Name, Title): Crystal Hishida Graff, Clerk, Board of Supervisors
Area Code/Phone Number: (510) 272-3882
E-mail: crystal.hishida@acgov.org

2. Function, Event, or Ceremonial Role Information

Title: Golden State Warriors
Description: Basketball Game
Face Value of Each Admission: $95.00
Date(s): 03/10/12
Ticket(s)/Admission(s) provided by agency? Yes [ ] No [x]
If no: Golden State Warriors
Name of Source:
Was the distribution to persons identified below made at the behest of an agency official?
Yes [x] No [ ]
If yes: Lockyer, Nadia - Supervisor, District 2
Official's Name (Last, First) and Title:
The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Briones, Mario</td>
<td>4</td>
<td>Yes [ ] No [ ]</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>To promote attendance at an event held at a County facility in order to maximize potential revenue from sales.</td>
</tr>
</tbody>
</table>

3. Verification
I have read and understand FPPC Regulations 18044.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

MICHELLE DIANDA
Signature of Agency Head or Designee
Print Name
Ticket Administrator
Title
Date: 3/5/12

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Includes 1 parking pass at a value of $18
Agency Report of:  
Ceremonial Role Events and 
Ticket/Admission Distributions

1. Agency Name
County of Alameda
Division, Department, or Region (if applicable)
Board of Supervisors
Street Address
1221 Oak Street, Suite 536
Designated Agency Contact (Name, Title)
Crystal Hishida Graff, Clerk, Board of Supervisors
Area Code/Phone Number E-mail
(510) 272-3882 crystal.hishida@acgov.org

2. Function, Event, or Ceremonial Role Information
Title Golden State Warriors
Description Basketball Game
Face Value of Each Admission $ 95.00
Date(s) 03 / 19 / 12
Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☐ If no: Golden State Warriors
Was the distribution to persons identified below made at the behest of an agency official?
Yes ☐ No ☐ If yes: Lockyer, Nadia- Supervisor, District 2
Official’s Name (Last, First) and Title
The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dunckel, Jon</td>
<td>4</td>
<td>Yes ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>∀ To promote attendance at an event held at a County facility in order to maximize potential revenue from sales. Income ☐</td>
</tr>
</tbody>
</table>

3. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

Signature of Agency Head or Designee: MICHELLE DIANDA
Print Name: Ticket Administrator: 3/13/12
Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Includes 1 parking pass at the value of $18

FPPC Form 802 (2/11)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and
Ticket/Admission Distributions

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Board of Supervisors
Street Address
1221 Oak Street, Suite 536
Designated Agency Contact (Name, Title)
Crystal Hishida Graff, Clerk, Board of Supervisors
Area Code/Phone Number E-mail
(510) 272-3882 crystal.hishida@acgov.org

2. Function, Event, or Ceremonial Role Information
Title Golden State Warriors
Face Value of Each Admission $ 95.00
Description Basketball Game
Date(s) 03/16/12
Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☑
If no: Golden State Warriors
Name of Source
Was the distribution to persons identified below made at the behest of an agency official?
Yes ☐ No ☐
If yes: Lockyer, Nadia- Supervisor District 2
Official's Name (Last, First) and Title
The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
</tr>
</thead>
<tbody>
<tr>
<td>Liang, John</td>
<td>4</td>
<td>Yes ☐ No ☑</td>
</tr>
<tr>
<td></td>
<td></td>
<td>To reward a student for outstanding scholastic achievement</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income ☐</td>
</tr>
</tbody>
</table>

3. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

Signature of Agency Head or Designee: MICHELLE DIANDA
Print Name: Ticket Administrator
Title: 3/16/12
Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Includes 1 parking pass at a value of $18
Agency Report of:
Ceremonial Role Events and Ticket/Admission Distributions

1. Agency Name
County of Alameda
Division, Department, or Region (if applicable)
Board of Supervisors
Street Address
1221 Oak Street, Suite 536
Designated Agency Contact (Name, Title)
Crystal Hishida Graff, Clerk, Board of Supervisors
Area Code/Phone Number E-mail
(510) 272-3882 crystal.hishida@acgov.org

A Public Document

Date Stamp
California Form 802
For Official Use Only

☐ Amendment (Must provide explanation in Part 3.)
Date of Original Filing: (month, day, year)

2. Function, Event, or Ceremonial Role Information
Title Golden State Warriors
Face Value of Each Admission $ 95.00
Description Basketball Game
Date(s) 03 / 30 / 12

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☑
If no. Golden State Warriors
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☐ No ☐
If yes: Lockyer, Nadia- Supervisor District 2
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
<th>Agency Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>Little, Lisa</td>
<td>4</td>
<td>Yes ☐ No ☑</td>
<td>To promote attendance at an event held at a County facility in order to maximize potential revenue from sales.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☐</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☐</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☐</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☐</td>
<td></td>
</tr>
</tbody>
</table>

3. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

MICHELLE DIANDA
Signature of Agency Head or Designee
Print Name
Ticket Administrator
Title

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Includes 1 parking pass at a value of $18

FPPC Form 802 (2/11)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Admission Distributions

1. Agency Name
   County of Alameda
   Division, Department, or Region (if applicable)
   Board of Supervisors
   Street Address
   1221 Oak Street, Suite 536
   Designated Agency Contact (Name, Title)
   Crystal Hishida Graff, Clerk, Board of Supervisors
   Area Code/Phone Number     E-mail
   (510) 272-3882     crystal.hishida@acgov.org

2. Function, Event, or Ceremonial Role Information
   Title: Golden State Warriors
   Description: Basketball Game
   Face Value of Each Admission $ 95.00
   Date(s): 04 / 07 / 12
   Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☐ If no: Golden State Warriors
   Name of Source
   Was the distribution to persons identified below made at the behest of an agency official?
   Yes ☐ No ☐ If yes: Lockyer, Nadia- Supervisor District 2
   Official’s Name (Last, First) and Title
   The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Kiwanis Club of Hayward</td>
<td>4</td>
<td>Yes ☐</td>
<td>☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No ☐</td>
<td>☐</td>
</tr>
<tr>
<td>24052 Mission Blvd., Hayward CA 94544</td>
<td></td>
<td>Yes ☐</td>
<td>☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No ☐</td>
<td>☐</td>
</tr>
<tr>
<td>To improve the community by assisting the aging,</td>
<td></td>
<td>Yes ☐</td>
<td>☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No ☐</td>
<td>☐</td>
</tr>
<tr>
<td>needy and youth.</td>
<td></td>
<td>Yes ☐</td>
<td>☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No ☐</td>
<td>☐</td>
</tr>
</tbody>
</table>

3. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

MICHIELLE DIANDA
Signature of Agency Head or Designee

Ticket Administrator
Print Name

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Includes 1 parking pass at the value of $18

FPPC Form 802 (2/11)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and
Ticket/Admission Distributions

1. Agency Name
County of Alameda
Division, Department, or Region (if applicable)
Board of Supervisors
Street Address
1221 Oak Street, Suite 536
Designated Agency Contact (Name, Title)
Crystal Hishida Graff, Clerk, Board of Supervisors
Area Code/Phone Number  E-mail
(510) 272-3882 crystal.hishida@acgov.org

2. Function, Event, or Ceremonial Role Information
Title  Oakland A's Game
Description  Baseball Game
Face Value of Each Admission $ 1568.00
Date(s)  05 / 11 / 12
Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☐ If no: Oakland A's
Was the distribution to persons identified below made at the behest of an agency official?
Yes ☐ No ☐ If yes: Lockyer, Nadia- Supervisor District 2
Official's Name (Last, First) and Title
The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lycett, Jeanne</td>
<td>20</td>
<td>Yes ☐ No ☐</td>
<td>Yes ☐ No ☐ To reward a community volunteer for her service to the public.</td>
</tr>
</tbody>
</table>

3. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

Signature of Agency Head or Designee: MICHELLE DIANDA  Print Name: Ticket Administrator: 3/24/12

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

FPPC Form 802 (2/11)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
## Agency Report of:
Ceremonial Role Events and Ticket/Admission Distributions

### 1. Agency Name
County of Alameda

**Division, Department, or Region (if applicable)**
Board of Supervisors

**Street Address**
1221 Oak Street, Suite 536

**Designated Agency Contact (Name, Title)**
Crystal Hishida Graff, Clerk, Board of Supervisors

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

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

### 2. Function, Event, or Ceremonial Role Information

**Title**
Oakland A's Game

**Face Value of Each Admission**
$1568.00

**Date(s)**
08/05/12

**Ticket(s)/Admission(s) provided by agency?**
Yes ☐ No ☐

**If no:**

**Name of Source**

**Was the distribution to persons identified below made at the behest of an agency official?**
Yes ☐ No ☐

**If yes:**
Lockyer, Nadia - Supervisor District 2

**Official’s Name (Last, First) and Title**

### The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Russell, Bridget</td>
<td>20</td>
<td>Yes ☐ No ☐</td>
<td>Income</td>
</tr>
</tbody>
</table>

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

### 3. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

**Signature of Agency Head or Designee**

**Print Name**
MICHELLE DIANDA

**Title**
Ticket Administrator

**Date**
3/29/12

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

---

FPPC Form 802 (2/11)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Admission Distributions

1. Agency Name
County of Alameda
Division, Department, or Region (if applicable)
Board of Supervisors
Street Address
1221 Oak Street, Suite 536
Designated Agency Contact (Name, Title)
Crystal Hishida Graff, Clerk, Board of Supervisors
Area Code/Phone Number E-mail
(510) 272-3882 crystal.hishida@acgov.org

2. Function, Event, or Ceremonial Role Information
Title POP2012
Description Concert
Face Value of Each Admission $ 91.00
Date(s) 03 / 31 / 12
Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☑
If no: Golden State Warriors

Was the distribution to persons identified below made at the behest of an agency official?
Yes ☐ No ☑
If yes: Lockyer, Nadia- Supervisor District 2
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

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<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
</tr>
</thead>
<tbody>
<tr>
<td>Briones, Miguel</td>
<td>4</td>
<td>Yes ☑</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>To promote attendance at an event held at a County facility in order to maximize potential revenue from sales. Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐</td>
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<td></td>
<td></td>
<td>No ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>No ☐</td>
</tr>
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</table>

3. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

MICHELLE DIANDA
Ticket Administrator

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Agency Report of:
Ceremonial Role Events and
Ticket/Admission Distributions

1. Agency Name
   County of Alameda
   Division, Department, or Region (if applicable)
   Board of Supervisors
   Street Address
   1221 Oak Street, Suite 536
   Designated Agency Contact (Name, Title)
   Crystal Hishida Graff, Clerk, Board of Supervisors
   Area Code/Phone Number
   (510) 272-3882
   E-mail
   crystal.hishida@acgov.org

2. Function, Event, or Ceremonial Role Information
   Title
   Oakland A's Game
   Description
   Baseball Game
   Face Value of Each Admission
   $75.00
   Date(s)
   07 / 03 / 12
   Ticket(s)/Admission(s) provided by agency?
   Yes ☐ No ☑
   If no:
   Name of Source
   Oakland A's
   Was the distribution to persons identified below made at the behest of an agency official?
   Yes ☐ No ☑
   If yes:
   Lockyer, Nadia- Supervisor District 2
   Official's Name (Last, First) and Title

   The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
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<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
</tr>
</thead>
<tbody>
<tr>
<td>Miura, Jesselle</td>
<td>4</td>
<td>Yes ☐ No ☑</td>
</tr>
<tr>
<td></td>
<td></td>
<td>To reward a community volunteer for her service to the public</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income ☑</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income ☑</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income ☑</td>
</tr>
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<td></td>
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<td></td>
<td>Income ☑</td>
</tr>
</tbody>
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3. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.
   Signature of Agency Head or Designee
   MICHELLE DIANDA
   Print Name
   Ticket Administrator
   Title
   (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
   Includes one parking pass at the value of $17

FPPC Form 802 (2/11)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and
Ticket/Admission Distributions

1. Agency Name
   County of Alameda
   Division, Department, or Region (if applicable)
   Board of Supervisors
   Street Address
   1221 Oak Street, Suite 536
   Designated Agency Contact (Name, Title)
   Crystal Hishida Graff, Clerk, Board of Supervisors
   Area Code/Phone Number  (510) 272-3882
   E-mail crystal.hishida@acgov.org

2. Function, Event, or Ceremonial Role Information
   Title Golden State Warriors
   Description Basketball Game
   Face Value of Each Admission $95.00
   Date(s) 04/12/12
   Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☑
   If no: Golden State Warriors
   Name of Source
   Was the distribution to persons identified below made at the behest of an agency official?
   Yes ☑ No ☐
   If yes: Lockyer, Nadia, Supervisor - District Two
   Official's Name (Last, First) and Title
   The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Villarreal, David</td>
<td>4</td>
<td>Yes ☐ No ☑</td>
<td>To provide attendance at an event held at a County facility in order to maximize potential revenue from sales.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☐</td>
<td>Income ☑</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☐</td>
<td>Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☐</td>
<td>Income ☐</td>
</tr>
<tr>
<td></td>
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<td>Yes ☐ No ☐</td>
<td>Income ☐</td>
</tr>
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<td>Yes ☐ No ☐</td>
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<td>Income ☐</td>
</tr>
</tbody>
</table>

3. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.
   Signature of Agency Head or Designee
   Michelle Dianda
   Print Name
   Ticket Administrator
   (Month, day, year) 3/29/12
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
   Includes one parking pass at the value of $18
Agency Report of:
Ceremonial Role Events and
Ticket/Admission Distributions

1. Agency Name
   County of Alameda
   Division, Department, or Region (if applicable)
   Board of Supervisors
   Street Address
   1221 Oak Street, Suite 536
   Designated Agency Contact (Name, Title)
   Crystal Hishida Graff, Clerk, Board of Supervisors
   Area Code/Phone Number
   (510) 272-3882
   E-mail
   crystal.hishida@acgov.org

2. Function, Event, or Ceremonial Role Information
   Title Golden State Warriors
   Description Basketball Game
   Face Value of Each Admission $ 95.00
   Date(s) 04/26/12
   Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: Golden State Warriors
   Name of Source
   Was the distribution to persons identified below made at the behest of an agency official?
   Yes ☐ No ☒ If yes: Lockyer, Nadia- Supervisor District 2
   Official's Name (Last, First) and Title

   The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hutchins, Henry</td>
<td>4</td>
<td>Yes ☐ No ☒</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>To promote attendance at an event held at a County facility in order to maximize potential revenue from sales.</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☒</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☒</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☒</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☒</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☒</td>
<td></td>
</tr>
</tbody>
</table>

3. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

   Signature of Agency Head or Designee
   MICHELLE DIANDA
   Print Name
   Ticket Administrator
   5/29/12
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
   Includes one parking pass at the value of $18
Agency Report of:
Ceremonial Role Events and
Ticket/Admission Distributions

1. Agency Name
   County of Alameda
   Division, Department, or Region (if applicable)
   Board of Supervisors

   Street Address
   1221 Oak Street, Suite 536

   Designated Agency Contact (Name, Title)
   Crystal Hishida Graff, Clerk, Board of Supervisors
   Area Code/Phone Number  E-mail
   (510) 272-3882  crystal.hishida@acgov.org

2. Function, Event, or Ceremonial Role Information
   Title
   Description Warriors vs. Hornets
   Face Value of Each Admission $ 95
   Date(s) 3 / 28 / 12

   Ticket(s)/Admission(s) provided by agency?  Yes  No  If no: Golden State Warriors
   Name of Source

   Was the distribution to persons identified below made at the behest of an agency official?
   Yes  No  If yes: Supervisor Wilma Chan
   Official's Name (Last, First) and Title

   The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
</tr>
</thead>
<tbody>
<tr>
<td>Biagas, Sharice</td>
<td>4 tickets</td>
<td>Yes  No</td>
</tr>
<tr>
<td></td>
<td></td>
<td>To promote attendance at an event held at a County facility in order to maximize potential</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income</td>
</tr>
</tbody>
</table>

   3. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

   Signature of Agency Head or Designee  Alexandra Boskovitch  Ticket Administrator  3/28/2012
   Print Name  Title  (month, day, year)

   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
### Agency Report of:
Ceremonial Role Events and Ticket/Admission Distributions

**1. Agency Name**

- County of Alameda
- Board of Supervisors

**Designated Agency Contact (Name, Title)**

- Crystal Hishida Graff, Clerk, Board of Supervisors

**Area Code/Phone Number**

- (510) 272-3882

**E-mail**

- crystal.hishida@acgov.org

**Date Stamp**

- California Form 802

**2. Function, Event, or Ceremonial Role Information**

<table>
<thead>
<tr>
<th>Title</th>
<th>Description</th>
<th>Face Value of Each Admission</th>
<th>Date(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Warriors vs. Nets</td>
<td>$95 + $18-park</td>
<td>3/30/12</td>
</tr>
</tbody>
</table>

**Ticket(s)/Admission(s) provided by agency?**

- Yes [ ] No [X] [if no: Golden State Warriors]

**Was the distribution to persons identified below made at the behest of an agency official?**

- Yes [ ] No [X]

**Official's Name (Last, First) and Title**

- Supervisor Wilma Chan

**The identity of recipient(s) and the explanation:**

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cravahlo, Brian</td>
<td>4 tickets + 1</td>
<td>Yes [X] No [ ]</td>
<td>To promote attendance at an event held at a County facility in order to maximize potential</td>
</tr>
<tr>
<td></td>
<td>parking pass</td>
<td>Yes [X] No [ ]</td>
<td>County revenue from sales.</td>
</tr>
</tbody>
</table>

**3. Verification**

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

**Signature of Agency Head or Designee**

Alexandra Boskovich

**Ticket Administrator**

Ticket Administrator

**Date**

3/26/2012 (month, day, year)

**Comment: (Use this space or an attachment for any additional information including amendment explanation.)**
Agency Report of:
Ceremonial Role Events and Ticket/Admission Distributions

1. Agency Name
   County of Alameda
   Division, Department, or Region (if applicable)
   Board of Supervisors
   Street Address
   1221 Oak Street, Suite 536
   Designated Agency Contact (Name, Title)
   Crystal Hishida Graff, Clerk, Board of Supervisors
   Area Code/Phone Number E-mail
   (510) 272-3882 crystal.hishida@acgov.org
   Amendment (Must provide explanation in Part 3.)
   Date of Original Filing: (month, day, year)

2. Function, Event, or Ceremonial Role Information
   Title  
   Description Warriors vs. Nuggets
   Face Value of Each Admission $95 + $18-park
   Date(s) 4/7/12
   Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☑ If no: Golden State Warriors
   Name of Source
   Was the distribution to persons identified below made at the behest of an agency official? Yes ☐ No ☑
   If yes: Supervisor Wilma Chan
   Official's Name (Last, First) and Title
   The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fong, Jeff</td>
<td>4 tickets + 1</td>
<td>Yes ☑ No ☐</td>
</tr>
<tr>
<td></td>
<td>parking pass</td>
<td>Yes ☑ No ☐</td>
</tr>
</tbody>
</table>

   • Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description.
   • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.

   To promote attendance at an event held at a County facility in order to maximize potential Income ☑
   County revenue from sales. Income ☑

3. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.
   Signature of Agency Head or Designee
   Alexandra Boskovich
   Ticket Administrator 3/26/2012 (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Agency Report of:
Ceremonial Role Events and
Ticket/Admission Distributions

1. Agency Name
   County of Alameda
   Division, Department, or Region (if applicable)
   Board of Supervisors
   Street Address
   1221 Oak Street, Suite 536
   Designated Agency Contact (Name, Title)
   Crystal Hishida Graff, Clerk, Board of Supervisors
   Area Code/Phone Number  E-mail
   (510) 272-3882  crystal.hishida@acgov.org

2. Function, Event, or Ceremonial Role Information
   Title ____________________________  Face Value of Each Admission $ $95 + $18-park
   Description Warriors vs. Celtics  Date(s) 3 / 14 / 12
   Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: Golden State Warriors
   Was the distribution to persons identified below made at the behest of an agency official?
   Yes ☐ No ☐ If yes: Supervisor Wilma Chan
   Official’s Name (Last, First) and Title

   The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
</tr>
</thead>
<tbody>
<tr>
<td>Gobel, Jason</td>
<td>20 tickets/4</td>
<td>Yes ☐ No ☐</td>
</tr>
<tr>
<td></td>
<td>parking pass</td>
<td>Yes ☐ No ☐</td>
</tr>
<tr>
<td></td>
<td>To promote attendance at an event held at a County facility in order to maximize potential</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Income</td>
<td>☐</td>
</tr>
<tr>
<td></td>
<td>County revenue from sales.</td>
<td>Income ☐</td>
</tr>
<tr>
<td></td>
<td>Income</td>
<td>☐</td>
</tr>
<tr>
<td></td>
<td>Income</td>
<td>☐</td>
</tr>
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<td></td>
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<td>☐</td>
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3. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

   Signature of Agency Head or Designee
   Alexandra Boskovich
   Ticket Administrator
   3/14/2012
   (month, day, year)

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

   FPPC Form 802 (2/11)
   FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and
Ticket/Admission Distributions

1. Agency Name
County of Alameda
Division, Department, or Region (if applicable)
Board of Supervisors
Street Address
1221 Oak Street, Suite 536
Designated Agency Contact (Name, Title)
Crystal Hishida Graff, Clerk, Board of Supervisors
Area Code/Phone Number
(510) 272-3882
E-mail
crystal.hishida@acgov.org

2. Function, Event, or Ceremonial Role Information
Title ____________________________
Face Value of Each Admission $ 95
Description Warriors vs. Timberwolves
Date(s) 3/19/12
Ticket(s)/Admission(s) provided by agency? Yes □ No □
If no: Golden State Warriors
Name of Source
Was the distribution to persons identified below made at the behest of an agency official?
Yes □ No □
If yes: Supervisor Wilma Chan
Official’s Name (Last, First) and Title
The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jordan, Krista</td>
<td>2</td>
<td>Yes □ No ☑</td>
</tr>
<tr>
<td></td>
<td></td>
<td>To promote attendance at an event held at a County facility in order to maximize potential Income ☑</td>
</tr>
<tr>
<td></td>
<td></td>
<td>County revenue from sales. Income</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income</td>
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3. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

Alexandra Boskovitch
Ticket Administrator
3/14/2012
(month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Agency Report of:
Ceremonial Role Events and
Ticket/Admission Distributions

1. Agency Name
   County of Alameda
   Board of Supervisors

   Street Address
   1221 Oak Street, Suite 536

   Designated Agency Contact (Name, Title)
   Crystal Hishida Graff, Clerk, Board of Supervisors

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

   Amendment (Must provide explanation in Part 3.)
   Date of Original Filing: (month, day, year)

2. Function, Event, or Ceremonial Role Information

   Title ____________________________
   Description Warriors vs. Kings

   Face Value of Each Admission $95 + $18-park
   Date(s) 3/24/12

   Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☐
   If yes: Golden State Warriors Name of Source

   Was the distribution to persons identified below made at the behest of an agency official? Yes ☐ No ☐
   If yes: Supervisor Wilma Chan Official's Name (Last, First) and Title

   The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
</tr>
</thead>
<tbody>
<tr>
<td>Baranco, Lauren</td>
<td>4 tickets + 1 parking pass</td>
<td>Yes ☐ No ☐</td>
</tr>
</tbody>
</table>

   - Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description.
   - If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.

3. Verification

   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

   Signature of Agency Head or Designee
   Alexandra Boskovich

   Ticket Administrator Print Name Title
   3/5/2012 (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)**

Board of Supervisors

**Street Address**

1221 Oak Street, Suite 536

**Designated Agency Contact (Name, Title)**

Crystal Hishida Graff, Clerk, Board of Supervisors

**Area Code/Phone Number**

(510) 272-3882

**E-mail**

crystal.hishida@acgov.org

---

### 2. Function, Event, or Ceremonial Role Information

**Title**

Warriors vs. Grizzlies

**Face Value of Each Admission**

$95 + $18-park

**Date(s)**

3/7/12

**Ticket(s)/Admission(s) provided by agency?** Yes [ ] No [ ]

If no: Golden State Warriors

**Name of Source**

---

**Was the distribution to persons identified below made at the behest of an agency official?**

Yes [ ] No [ ]

If yes: Supervisor Wilma Chan

**Official's Name (Last, First) and Title**

---

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
<th>Explanation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Johnson, Rose</td>
<td>4 tickets + 1</td>
<td>Yes [ ] No [ ]</td>
<td>To promote attendance at an event held at a County facility in order to maximize potential</td>
</tr>
<tr>
<td></td>
<td>parking pass</td>
<td>Yes [ ] No [ ]</td>
<td>County revenue from sales.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes [ ] No [ ]</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes [ ] No [ ]</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes [ ] No [ ]</td>
<td></td>
</tr>
</tbody>
</table>

---

### 3. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

**Signature of Agency Head or Designee**

Alexandra Boskovich

**Ticket Administrator**

Print Name

**Title**

3/5/2012

(month, day, year)

**Comment:** (Use this space or an attachment for any additional information including amendment explanation.)
Agency Report of:
Ceremonial Role Events and Ticket/Admission Distributions

1. Agency Name
   County of Alameda
   Division, Department, or Region (if applicable)
   Board of Supervisors
   Street Address
   1221 Oak Street, Suite 536
   Designated Agency Contact (Name, Title)
   Crystal Hishida Graff, Clerk, Board of Supervisors
   Area Code/Phone Number
   (510) 272-3882
   E-mail crystal.hishida@acgov.org

2. Function, Event, or Ceremonial Role Information

   Title ____________________________
   Description Disney On Ice
   Face Value of Each Admission $32.10
   Date(s) 3/1/12 3/4/12
   Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒
   If no: Golden State Warriors
   Name of Source ____________________________

   Was the distribution to persons identified below made at the behest of an agency official?
   Yes ☐ No ☐
   If yes: Supervisor Wilma Chan
   Official’s Name (Last, First) and Title ____________________________

   The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First) or Organization (Name, Address, Description)</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
</tr>
</thead>
<tbody>
<tr>
<td>San Lorenzo Preschool</td>
<td>8</td>
<td>Yes ☐ No ☒</td>
</tr>
<tr>
<td>820 Bockman Rd. San Lorenzo, CA</td>
<td></td>
<td>Yes ☐ No ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☐</td>
</tr>
</tbody>
</table>

   • Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description.
   • If not Income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.

3. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

Signature of Agency Head or Designee: ____________________________
Alexandra Boskovich
Ticket Administrator: ____________________________
03/1/2012
(month, day, year)

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