**Agency Report of:**
Ceremonial Role Events and Ticket/Pass Distributions

1. **Agency Name**
   Alameda County

2. **Function or Event Information**
   - **Event Description:** WWE Live
   - **Face Value of Each Ticket/Pass:** $84.15
   - **Date(s):** 02 / 07 / 14
   - **Ticket(s)/Pass(es) provided by agency:** Yes
   - **Was ticket distribution made at the behest of agency official:** Yes

3. **Recipients**
   - **A. Name of Agency, Department or Unit**
   - **Number of Ticket(s)/Pass(es)**
   - **Describe the public purpose made pursuant to the agency's policy**

   - **B. Name of Individual**
     Mejia, Manuel
     **Number of Ticket(s)/Pass(es):** 4
     **Identify one of the following:** Other

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

4. **Verification**
   - **Signature of Agency Head or Designee:**
   - **Print Name:** Michelle Dianda
   - **Title:** Supervisor's Aide
   - **Date of Original Filing:** 2/4/14

   **Comment:**
# Agency Report of:
## Ceremonial Role Events and Ticket/Pass Distributions

### 1. Agency Name
- **Alameda County**
- **Division, Department, or Region (if Applicable):** Board of Supervisors
- **Designated Agency Contact (Name, Title):**
  - Michelle Dianda
  - **Area Code/Phone Number:** (510) 272-6692
  - **E-mail:** michelle.dianda@acgov.org

### 2. Function or Event Information
- **Does the agency have a ticket policy?** Yes [X] No [ ]
- **Event Description:** Warriors vs. Kings
- **Face Value of Each Ticket/Pass** $250.00
- **Date(s):** 04 / 04 / 14
- **Ticket(s)/Pass(es) provided by agency?** Yes [ ] No [X]
- **If yes, Name of Source:**
  - **Valle, Richard- Supervisor District 2**
  - **Official’s Name (Last, First):**

### 3. Recipients
- **A. Name of Agency, Department or Unit**
  - **Number of Ticket(s)/Pass(es)**
  - **Describe the public purpose made pursuant to the agency’s policy**

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
</table>

- **B. Name of Individual**
  - **Last, First**
  - **Number of Ticket(s)/Pass(es)**
  - **Identify one of the following:**
    - Ceremonial Role [ ]
    - Other [ ]
    - Income [ ]

<table>
<thead>
<tr>
<th>Name of Individual</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Ceremonial Role [ ]</th>
<th>Other [ ]</th>
<th>Income [ ]</th>
</tr>
</thead>
</table>

- **C. Name of Outside Organization**
  - **Include address and description:**
    - Newark Memorial Athletic Booster Club
    - 39375 Cedar Blvd., Newark CA 94560
    - **Number of Ticket(s)/Pass(es):** 4
    - **Describe the public purpose made pursuant to the agency’s policy**

<table>
<thead>
<tr>
<th>Name of Outside Organization</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
</table>

### 4. Verification
- **Signature of Agency Head or Designee:**
  - Michelle Dianda
- **Print Name:**
  - Supervisor’s Aide
- **Title:**
  - [Month, Day, Year]

**Comment:** Includes 1 parking pass at the value of $20.
### Agency Report of:
**Ceremonial Role Events and Ticket/Pass Distributions**

**1. Agency Name**
Alameda County

**Division, Department, or Region (If Applicable)**
Board of Supervisors

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

**Area Code/Phone Number** (510) 272-6692
**E-mail** michelle.dianda@acgov.org

**Date Stamp**

**California Form 802**
For Official Use Only

**2. Function or Event Information**

- **Does the agency have a ticket policy?** Yes ☑ No ☐
- **Face Value of Each Ticket/Pass $** 550.00
- **Event Description** Warriors vs. Rockets
  
  **Provide Title/Explanations**
  
  **Ticket(s)/Pass(es) provided by agency?** Yes ☐ No ☑
  
  **Date(s)** 02 / 20 / 14
  
  **If no:** Golden State Warriors
  
  **Name of Source**
  
  **Was ticket distribution made at the behest of agency official?** No ☐ Yes ☑
  
  **If yes:** Valle, Richard - Supervisor District 2
  
  **Official’s Name (Last, First)**

**3. Recipients**

- Use Section A to identify the agency’s department or unit.
- Use Section B to identify an individual.
- Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maxey, Mike</td>
<td>2</td>
<td>Ceremonial Role ☑ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</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>
<tr>
<td>Trejo, Humberto</td>
<td>2</td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</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 sale</td>
</tr>
</tbody>
</table>

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<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
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</tr>
</thead>
<tbody>
<tr>
<td></td>
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</table>

**4. Verification**

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

**Signature of Agency Head or Designee**
Michelle Dianda

**Print Name**

**Title**

**Supervisor’s Aide**

**Date (Month, Day, Year)** 2/13/14

**Comment:** Includes 1 parking pass at the value of $20

---

FPPC Form 802 (4/12)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Alameda County
   Division, Department, or Region (If Applicable)
   Board of Supervisors
   Designated Agency Contact (Name, Title)
   Michelle Dianda

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

2. Function or Event Information

   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $ 550.00
   Event Description Warriors vs. Rockets
   Date(s) 02 / 20 / 14
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   If no: Golden State Warriors
   Name of Source
   If yes: Valle, Richard- Supervisor District 2
   Official's Name (Last, First)

3. Recipients

   • Use Section A to identify the agency’s department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency's policy
   ____________________________ | ____________________________ | ____________________________________________________________
   ____________________________ | ____________________________ | ____________________________________________________________

   B. Name of Individual | Number of Ticket(s)/Pass(es) | Identify one of the following:
   ____________________________ | ____________________________ | Ceremonial Role ☐ Other ☒ Income ☐
   Hildreth, Jaken | 2 | To promote attendance at an event held at a County facility in order to maximize potential revenue from sales.
   ____________________________ | ____________________________ | Ceremonial Role ☐ Other ☐ Income ☐
   Jackson, James | 2 | To promote attendance at an event held at a County facility in order to maximize potential revenue from sale

   C. Name of Outside Organization (Include address and description) | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency's policy
   ____________________________ | ____________________________ | ____________________________________________________________
   ____________________________ | ____________________________ | ____________________________________________________________

4. Verification

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

   Signature of Agency Head or Designee: Michelle Dianda
   Print Name: ____________________________
   Title: Supervisor’s Aide
   Month, Day, Year: 2/13/14

   Comment: Includes 1 parking pass at the value of $20
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Alameda County

Division, Department, or Region (If Applicable)
Board of Supervisors

Designated Agency Contact (Name, Title)
Michelle Dianda

Area Code/Phone Number E-mail
(510) 272-6692 michelle.dianda@acgov.org

Date Stamp

California Form 802
For Official Use Only

A. Function or Event Information
Does the agency have a ticket policy? Yes ☒ No ☐
Face Value of Each Ticket/Pass $ 550.00
Event Description Warriors vs. Rockets
Provide Title/Explanation
Date(s) 02/14/14
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
If no: Golden State Warriors
Name of Source
Was ticket distribution made at the behest of agency official? Yes ☒ No ☐
If yes: Valle, Richard- Supervisor District 2
Official's Name (Last, First)

B. Recipients
* Use Section A to identify the agency’s department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
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</thead>
<tbody>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Individual</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bennett, Octavio</td>
<td>2</td>
<td>Ceremonial Role ☐ Other ☒ Income ☐</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>

| Jacob, Prentice             | 2                            | Ceremonial Role ☐ Other ☐ Income ☐ |
|                             |                              | To promote attendance at an event held at a County facility in order to maximize potential revenue from sale |

C. Name of Outside Organization (include address and description) | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency's policy |
<table>
<thead>
<tr>
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<td></td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee: Michelle Dianda
Print Name: Supervisor's Aide: Title:
(Month, Day, Year) 2/13/14

Comment: Includes 1 parking pass at the value of $20

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Alameda County
   Division, Department, or Region (if Applicable)
   Board of Supervisors
   Designated Agency Contact (Name, Title)
   Michelle Dianda
   Area Code/Phone Number
   (510) 272-6692
   E-mail
   michelle.dianda@acgov.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $ 550.00
   Event Description
   Warriors vs. Rockets
   Date(s) 02 / 20 / 14
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   If no: Golden State Warriors
   Name of Source
   If yes: Valle, Richard - Supervisor District 2
   Official’s Name (Last, First)
   Was ticket distribution made at the behest of agency official? No ☒ Yes ☐

3. Recipients
   * Use Section A to identify the agency’s department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
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<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Ceremonial Role ☐ Other ☒ Income ☐</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rodriguez, Robert</td>
<td>2</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>

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Ceremonial Role ☐ Other ☐ Income ☐</th>
</tr>
</thead>
<tbody>
<tr>
<td>Otero, Heysell</td>
<td>2</td>
<td>To promote attendance at an event held at a County facility in order to maximize potential revenue from sale</td>
</tr>
</tbody>
</table>

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

   Signature of Agency Head or Designee: Michelle Dianda
   Print Name: Michelle Dianda
   Supervisor’s Aide: 2/13/14
   (Month, Day, Year)
   Includes 1 parking pass at the value of $20

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Alameda County

   Division, Department, or Region (If Applicable)
   Board of Supervisors

   Designated Agency Contact (Name, Title)
   Michelle Dianda

   Area Code/Phone Number E-mail
   (510) 272-6692 michelle.dianda@acgov.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $ 550.00
   Event Description Warriors vs. Rockets
   Date(s) 02 / 20 / 14
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   If no: Golden State Warriors
   Name of Source: 
   Was ticket distribution made at the behest of agency official? No ☐ Yes ☒
   If yes: Valle, Richard- Supervisor District 2
   Official’s Name (Last, First)

3. Recipients
   • Use Section A to identify the agency’s department or unit.
   • Use Section B to identify an individual.
   • Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency’s policy

   B. Name of Individual (Last, First) | Number of Ticket(s)/Pass(es) | Identify one of the following:
   Mou, Xin 2
   Ceremonial Role ☐ Other ☒ Income ☐
   To promote attendance at an event held at a County facility in order to maximize potential revenue from sales.
   Gonzalez, Yesenia 2
   Ceremonial Role ☐ Other ☐ Income ☐
   To promote attendance at an event held at a County facility in order to maximize potential revenue from sale

   C. Name of Outside Organization (include address and description) | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency’s policy

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head or Designee: Michelle Dianda
   Date: 2/13/14
   Supervisor’s Aide: Print Name
   Title: (Month, Day, Year)

Comment: ________________________________
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Alameda County
Division, Department, or Region (If Applicable)
Board of Supervisors
Designated Agency Contact (Name, Title)
Michelle Dianda
Area Code/Phone Number E-mail
(510) 272-6692 michelle.dianda@acgov.org

2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No ☐
Face Value of Each Ticket/Pass $ 23.85
Event Description Disney on Ice
Provide Title/Explanation
Date(s) 02 / 26 / 14
Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐
If no: Golden State Warriors
Name of Source
Was ticket distribution made at the behest of agency official? No ☑ Yes ☒
If yes: Valle, Richard- Supervisor District 2
Official’s Name (Last, First)

3. Recipients
• Use Section A to identify the agency’s department or unit.
• Use Section B to identify an individual.
• Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit Number of Ticket(s)/Pass(es)
Describe the public purpose made pursuant to the agency’s policy

B. Name of Individual (Last, First) Number of Ticket(s)/Pass(es)
Identify one of the following:
Ceremonial Role ☐ Other ☐ Income ☐
If checking “Ceremonial Role” or “Other” describe below:
To promote attendance at an event held at a County facility in order to maximize potential sales from revenue.

C. Name of Outside Organization (include address and description) Number of Ticket(s)/Pass(es)
Describe the public purpose made pursuant to the agency’s policy

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
Signature of Agency Head or Designee Michelle Dianda Supervisor’s Aide
Print Name Title
(Month, Day, Year)

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Name: Alameda County

Division, Department, or Region (If Applicable): Board of Supervisors

Designated Agency Contact (Name, Title): Michelle Dianda

Area Code/Phone Number: (510) 272-6692

E-mail: michelle.dianda@acgov.org

Date of Original Filing:

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No □

Face Value of Each Ticket/Pass $ __________ 37.65

Event Description: Disney on Ice

Date(s): 03 / 02 / 14 ________ / ________ / ________

Ticket(s)/Pass(es) provided by agency? Yes □ No ☒

If no: Golden State Warriors

Name of Source: ________

If yes: Valle, Richard- Supervisor District 2

Official's Name (Last, First): ________

3. Recipients

* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
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<tbody>
<tr>
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<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Simms, Steven</td>
<td>4</td>
<td>Ceremonial Role □ Other □ Income □</td>
</tr>
</tbody>
</table>

If checking "Ceremonial Role" or "Other" describe below:

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

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
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4. Verification

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

Signature of Agency Head or Designee: ____________________________

Print Name: Michelle Dianda

Supervisor's Aide: ____________________________

Title: ____________________________

(Full Name, Day, Year)

Comment: ____________________________
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Alameda County
Division, Department, or Region (If Applicable)
Board of Supervisors
Designated Agency Contact (Name, Title)
Michelle Dianda
Area Code/Phone Number  E-mail
(510) 272-6692  michelle.dianda@acgov.org

2. Function or Event Information
Does the agency have a ticket policy?  Yes ☒ No ☐
Event Description  Miley Cyrus Concert
Provide Title/Explanation
Ticket(s)/Pass(es) provided by agency?  Yes ☐ No ☒
Was ticket distribution made at the behest of agency official?  No ☐ Yes ☒
Face Value of Each Ticket/Pass $  157.30
Date(s)  02/24/14
If no:  Golden State Warriors
Name of Source
If yes:  Valle, Richard- Supervisor District 2
Official’s Name (Last, First)

3. Recipients
* Use Section A to identify the agency's department or unit.  * Use Section B to identify an individual.  * Use Section C to identify an outside organization.

<table>
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<tr>
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<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rodriguez, Angelina</td>
<td>3</td>
<td>Ceremonial Role ☐ Other ☒ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</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>
<tr>
<td>Bonta, Rob</td>
<td></td>
<td>Ceremonial Role ☐ Other ☒ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
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<td>To promote attendance at an event held at a County facility in order to maximize potential revenue from sales.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Outside Organization (include address and description)</th>
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4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee  Print Name  Title
Michelle Dianda  Supervisor's Aide
(Month, Day, Year)

Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Alameda County

Division, Department, or Region (If Applicable)
Board of Supervisors
Designated Agency Contact (Name, Title)
Anna Gee

Area Code/Phone Number E-mail
(510) 272-6694 anna.gee@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 or Event Information
Does the agency have a ticket policy? Yes X No □
Face Value of Each Ticket/Pass $ ___________ 200.00

Event Description: basketball game
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes □ No X
Date(s) 02 / 10 / 14 __________ / __________

If no: Golden State Warriors
Name of Source

If yes: Miley, Nate
Official's Name (Last, First)

3. Recipients
* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>To promote an event held at a County facility in order to maximize potential County revenue from parking and concession sales</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ceremonial Role □ Other □ Income □</td>
<td></td>
<td></td>
</tr>
<tr>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>United Seniors of Oakland &amp; Alameda County - senior advocacy</td>
<td>4</td>
<td>To promote health, motivate and provide expanded opportunities to vulnerable populations in the County such as the disabled, underprivileged, seniors and youth in foster care.</td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee
Anna Gee

Print Name
Operations Chief
02/01/14
Title
(Month, Day, Year)

Comment: parking pass

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Alameda County
Board of Supervisors
Designated Agency Contact (Name, Title)
Anna Gee
Area Code/Phone Number (510) 272-6694
E-mail anna.gee@acgov.org

2. Function or Event Information
Does the agency have a ticket policy? Yes ☒ No ☐
Event Description basketball game
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
Was ticket distribution made at the behest of agency official? No ☐ Yes ☒
Face Value of Each Ticket/Pass $ 200.00
Date(s) 03 / 07 / 14
If no: Golden State Warriors
Name of Source
If yes: Miley, Nate
Official's Name (Last, First)

3. Recipients
- Use Section A to identify the agency's department or unit.
- Use Section B to identify an individual.
- Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
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<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
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<tr>
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<td></td>
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<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>United Seniors of Oakland &amp; Alameda County - senior advocacy</td>
<td>4</td>
<td>To promote health, motivate and provide expanded opportunities to vulnerable populations in the County such as the disabled, underprivileged, seniors and youth in foster care.</td>
</tr>
<tr>
<td>7200 Bancroft Ave, Ste 251 Oakland, CA 94605</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee: Anna Gee
Print Name: Operators Chief: 02/01/14
(Month, Day, Year)

Comment: parking pass
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Alameda County
Division, Department, or Region (If Applicable)
Board of Supervisors
Designated Agency Contact (Name, Title)
Anna Gee
Area Code/Phone Number (510) 272-6694
E-mail anna.gee@acgov.org

2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No □
Event Description basketball game
Ticket(s)/Pass(es) provided by agency? Yes □ No ☑
Was ticket distribution made at the behest of agency official? Yes ☑ No □
Face Value of Each Ticket/Pass $ 300.00
Date(s) 03 / 14 / 14
If no:
Name of Source
Golden State Warriors
If yes:
Official’s Name (Last, First)
Miley, Nate

3. Recipients
- Use Section A to identify the agency’s department or unit.
- Use Section B to identify an individual.
- Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
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<td></td>
<td>To promote an event held at a County facility in order to maximize potential County revenue from parking and concession sales</td>
</tr>
</tbody>
</table>

| B. Name of Individual (Last, First) | Number of Ticket(s)/Pass(es) | Identify one of the following: 
Ceremonial Role □ Other ☑ Income □ |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Ma, Milton</td>
<td>4</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>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee Anna Gee Print Name Operators Chief Title 02/01/14 (Month, Day, Year)

Comment: parking pass
**Agency Report of:**
Ceremonial Role Events and Ticket/Pass Distributions

1. **Agency Name**
   - Alameda County
   - Board of Supervisors
   - Designated Agency Contact (Name, Title)
   - Anna Gee
   - Area Code/Phone Number (510) 272-6694
   - E-mail anna.gee@acgov.org

   **Date Stamp**
   - California Form 802
   - For Official Use Only
   - Amendment (Must provide explanation in Part 3)
   - Date of Original Filing: ___________________________

2. **Function or Event Information**
   - Does the agency have a ticket policy? Yes ☑ No □
   - Face Value of Each Ticket/Pass $ 157.30
   - Event Description Miley Cyrus
   - Date(s) 02 / 24 / 17
   - Ticket(s)/Pass(es) provided by agency? Yes ☑ No □
   - If no: Golden State Warriors
   - Name of Source ___________________________
   - Was ticket distribution made at the behest of agency official? No ☑ Yes ☑
   - If yes: Miley, Nate
   - Official’s Name (Last, First) ___________________________

3. **Recipients**
   - Use Section A to identify the agency’s department or unit.
   - Use Section B to identify an individual.
   - Use Section C to identify an outside organization.

   **A.**
   - Name of Agency, Department or Unit ___________________________
   - Number of Ticket(s)/Pass(es) ___________________________
   - Describe the public purpose made pursuant to the agency’s policy ___________________________

   **B.**
   - Name of Individual ___________________________
   - Number of Ticket(s)/Pass(es) ___________________________
   - IDentify one of the following:
     - Ceremonial Role ☐ Other ☑ Income ☐
     - If checking “Ceremonial Role” or “Other” describe below: To promote attendance at an event held at a County facility in order to maximize potential County revenue from parking and concession sales.

   **C.**
   - Name of Outside Organization (include address and description) ___________________________
   - Number of Ticket(s)/Pass(es) ___________________________
   - Describe the public purpose made pursuant to the agency’s policy ___________________________

4. **Verification**
   - I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

   **Signature of Agency Head or Designee** ___________________________
   - Anna Gee
   - Operations Chief
   - Print Name ___________________________
   - Title ___________________________
   - Date (Month, Day, Year) 02/01/14

Comment: ___________________________

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Alameda County
   Division, Department, or Region (If Applicable)
   Board of Supervisors
   Designated Agency Contact (Name, Title)
   Anna Gee

   Area Code/Phone Number E-mail
   (510) 272-6694 anna.gee@acgov.org

   □ Amendment (Must provide explanation in Part 3)

   Date of Original Filing:

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Event Description: Disney on Ice
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   Was ticket distribution made at the behest of agency official? No ☐ Yes ☒
   Face Value of Each Ticket/Pass $ ______ 23.85/37.65
   Date(s): 02/26/14 02/27/14
   If no: Golden State Warriors
   If yes: Miley, Nate

3. Recipients
   • Use Section A to identify the agency’s department or unit.
   • Use Section B to identify an individual.
   • Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency’s policy

   B. Name of Individual
      Last Name
      Number of Ticket(s)/Pass(es)
      Identify one of the following:
      Ceremonial Role ☐ Other ☐ Income ☒
      If checking “Ceremonial Role” or “Other” describe below:

   C. Name of Outside Organization
      (Include address and description)
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency’s policy
      United Seniors of Oakland & Alameda County - 7200 Bancroft Ave, Ste 251
      8 To promote health, motivate and provide expanded opportunities to vulnerable populations in the County such as the disabled, underprivileged, seniors and youth in foster care.
      Oakland, CA 94605 SENIOR ADVOCACY

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

   Signature of Agency Head or Designee

   Anna Gee Operations Chief
   Print Name Title
   02/01/14 (Month, Day, Year)

Comment: 4 tickets to each.
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Alameda County
   Division, Department, or Region (If Applicable)
   Board of Supervisors
   Designated Agency Contact (Name, Title)
   Anna Gee
   Area Code/Phone Number (510) 272-6694
   E-mail anna.gee@acgov.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Event Description Disney on Ice
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   Was ticket distribution made at the behest of agency official? No ☐ Yes ☑
   Face Value of Each Ticket/Pass $ 37.65
   Date(s) 02/27/14 02/28/14
   If no: Golden State Warriors
   Name of Source
   If yes: Miley, Nate
   Official’s Name (Last, First)

3. Recipients
   Use Section A to identify the agency’s department or unit.
   Use Section B to identify an individual.
   Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

   | Name of Individual (Last, First) | Number of Ticket(s)/Pass(es) | Ceremonial Role ☐ Other ☑ Income ☐
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Martínez, Louie</td>
<td>4</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>

<table>
<thead>
<tr>
<th>Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>United Seniors of Oakland &amp; Alameda County-7200 Bancroft Ave, Ste 251</td>
<td>4</td>
<td>To promote health, motivate and provide expanded opportunities to vulnerable populations in the County such as the disabled, underprivileged, seniors and youth in foster care</td>
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4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

   Signature of Agency Head or Designee: Anna Gee
   Print Name: Operations Chief
   Title: 02/01/14 (Month, Day, Year)

Comment:
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Alameda County

   Division, Department, or Region (If Applicable)
   Board of Supervisors

   Designated Agency Contact (Name, Title)
   Anna Gee

   Area Code/Phone Number (510) 272-6694
   E-mail anna.gee@acgov.org

2. Function or Event Information
   Does the agency have a ticket policy?  Yes ☑ No ☐

   Event Description Disney on Ice

   Ticket(s)/Pass(es) provided by agency?  Yes ☑ No ☐

   Was ticket distribution made at the behest of agency official?  No ☑ Yes ☑

   Face Value of Each Ticket/Pass $ 37.65

   Date(s) 03/01/14

   If no: Golden State Warriors

   Name of Source

   If yes: Miley, Nate

   Official’s Name (Last, First)

3. Recipients

   • Use Section A to identify the agency’s department or unit.
   • Use Section B to identify an individual.
   • Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit  Number of Ticket(s)/Pass(es)  Describe the public purpose made pursuant to the agency’s policy

   B. Name of Individual  Number of Ticket(s)/Pass(es)  Identify one of the following:

   Turner, Matthew  4  Ceremonial Role ☐ Other ☑ Income ☐

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

   4  Ceremonial Role ☐ Other ☐ Income ☐

   concession sales.

   C. Name of Outside Organization (include address and description)  Number of Ticket(s)/Pass(es)  Describe the public purpose made pursuant to the agency’s policy

4. Verification

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

   Signature of Agency Head or Designee

   Anna Gee

   Print Name

   Operations Chief

   Title

   02/01/14

   (Month, Day, Year)

   Comment:
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Alameda County
Division, Department, or Region (If Applicable)
Board of Supervisors
Designated Agency Contact (Name, Title)
Anna Gee
Area Code/Phone Number  E-mail
(510) 272-6694  anna.gee@acgov.org

2. Function or Event Information
Does the agency have a ticket policy?  Yes ☒  No ☐
Event Description  Warrior's Basketball Game
Provide Title/Explanation
Ticket(s)/Pass(es) provided by agency?  Yes ☐  No ☒
If yes:  Golden State Warriors
Name of Source
If no:  Miley, Nate
Official's Name (Last, First)
Face Value of Each Ticket/Pass $ 200
Date(s) 03/09/14

3. Recipients
* Use Section A to identify the agency's department or unit.  * Use Section B to identify an individual.  * Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
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</thead>
<tbody>
<tr>
<td>City of Oakland</td>
<td>4</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>
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<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
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<th>Identify one of the following:</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐  Other ☐  Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐  Other ☐  Income ☐</td>
</tr>
</tbody>
</table>

<table>
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<tr>
<th>C. Name of Outside Organization (Include address and description)</th>
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4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee  Anna Gee  Operations Chief  03/03/14
Print Name  Title

Comment:
### Agency Report of:
**Ceremonial Role Events and Ticket/Pass Distributions**

**1. Agency Name**
- Alameda County
- Division, Department, or Region (If Applicable): Board of Supervisors
- Designated Agency Contact (Name, Title): Anna Gee
- Area Code/Phone Number: (510) 272-6694
- E-mail: anna.gee@acgov.org

**2. Function or Event Information**
- Does the agency have a ticket policy? Yes ☑ No ☐
- Event Description: Warrior's Basketball Game
- Face Value of Each Ticket/Pass: $300
- Date(s): 03/11/14
- Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐
- If no: Golden State Warriors
- Name of Source: Miley, Nate
- Was ticket distribution made at the behest of agency official? Yes ☑ No ☐

**3. Recipients**
- Use Section A to identify the agency’s department or unit.
- Use Section B to identify an individual.
- Use Section C to identify an outside organization.

<table>
<thead>
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<th>A. Name of Agency, Department or Unit</th>
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<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Ceremonial Role ☐ Other ☐ Income ☐</th>
</tr>
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<tbody>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
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<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
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<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
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</thead>
<tbody>
<tr>
<td>United Seniors of Oakland &amp; Alameda County-7200 Bancroft Ave, Ste 251</td>
<td>4</td>
<td>To promote health, motivate and provide expanded opportunities to vulnerable populations in the County such as the disabled, underprivileged, seniors and youth in foster care.</td>
</tr>
</tbody>
</table>

**4. Verification**
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee: Anna Gee

Print Name: Anna Gee

Operations Chief: (Last, First)

Signature: Anna Gee

Date: 03/03/14
(Month, Day, Year)

Comment: 

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Alameda County

Division, Department, or Region (If Applicable)
Board of Supervisors

Designated Agency Contact (Name, Title)
Anna Gee
Area Code/Phone Number E-mail
(510) 272-6694 anna.gee@acgov.org

2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No ☐

Event Description Warrior's Basketball Game

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑

Was ticket distribution made at the behest of agency official? No ☐ Yes ☑

Face Value of Each Ticket/Pass $ 350

Date(s) 03/30/14

If no: Golden State Warriors

If yes: Miley, Nate

3. Recipients
1. Use Section A to identify the agency's department or unit. 2. Use Section B to identify an individual. 3. Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
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<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hill, Jim</td>
<td>4</td>
<td>Ceremonial Role ☐ Other ☑ Income ☐</td>
</tr>
<tr>
<td></td>
<td></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>
<tr>
<td></td>
<td>4</td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Youth UpRising-8711 Mac Arthur Blvd, Oakland, CA 94605</td>
<td>2</td>
<td>To promote health, motivate and provide expanded opportunities to vulnerable populations in the County such as the disabled, underprivileged, seniors and youth in foster care.</td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee: Anna Gee

Operations Chief: 03/03/14

Comment: 

FPPC Form 802 (4/12)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Oakland/Alameda County Coliseum Authority
   Division, Department, or Region (if Applicable)
   Alameda County Supervisor Scott Haggerty, D1
   Designated Agency Contact (Name, Title)
   LeeAnn Ferguson, Ticket Administrator
   Area Code/Phone Number 510 272-6691
   E-mail leeanne.fergerson@acgov.org

2. Function or Event Information
   Does the agency have a ticket policy?
   Yes [X] No
   Face Value of Each Ticket/Pass $ 84.15
   Event Description
   Provide Title/Explanation
   Date(s) 2/7/14
   Ticket(s)/Pass(es) provided by agency?
   Yes [X] No
   If no:
   Name of Source
   Alameda County Supervisor Scott Haggerty, District 1
   Official’s Name (Last, First)
   Was ticket distribution made at the behest of agency official?
   No [X] Yes

3. Recipients
   Use Section A to identify the agency’s department or unit.
   Use Section B to identify an individual.
   Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency’s policy

   B. Name of Individual (Last, First)
      Number of Ticket(s)/Pass(es)
      Identify one of the following:
      To promote attendance at a county sponsored event in order to maximize potential county revenue for concession and parking sales
      Ceremonial Role [X] Other
      If checking “Ceremonial Role” or “Other” describe below:
      Income [ ]

   C. Name of Outside Organization (Include address and description)
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency’s policy

4. Verification
   I have read and understand FPPC Regulations 16944.1 and 16942.
   I have verified that the distribution set forth above, is in accordance with the requirements.
   LeeAnn Ferguson, Ticket Administrator
   Signature of Agency Head or Designee
   Print Name
   Title
   (Month, Day, Year)

Comment: 
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Alameda County
   Division, Department, or Region (If Applicable)
   Board of Supervisors
   Designated Agency Contact (Name, Title)
   Lee Ann Fergerson, Supervisor's Assistant
   Area Code/Phone Number  (510) 272-6691
   E-mail leean.fergerson@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 or Event Information
   Does the agency have a ticket policy? Yes ☐ No ☐
   Face Value of Each Ticket/Pass $ 3,000
   Event Description NORTHERN BEACHES
   Provide Title/Explanation
   Date(s) 3/11/14
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐
   Name of Source GSW
   Was ticket distribution made at the behest of agency official? No ☐ Yes ☐
   If yes: Alameda County Supervisor Scott Haggerty, District 1
   Official's Name (Last, First)

3. Recipients
   • Use Section A to identify the agency's department or unit.
   • Use Section B to identify an individual.
   • Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy

   B. Name of Individual (Last, First)
      Number of Ticket(s)/Pass(es)
      Identify one of the following:
      Ceremonial Role ☐ Other ☐ Income ☐
      If checking "Ceremonial Role" or "Other" describe below:

   C. Name of Outside Organization (include address and description)
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy
      Livermore Valley Charter School 2014 Crab Feed Dinner
      3142 Constitution Drive
      Livermore, CA 94551
      2
      To reward a school or nonprofit organization for its contributions to the community.

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

   Signature of Agency Head or Designee
   Lee Ann Fergerson
   Supervisor's Assistant
   (Month, Day, Year)
   Comment: WVCS is a non-profit org with 20264794 this to host with teachers & staff w/ much needed supplies
   FPPC Form 802 (4/12)
   FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Alameda County
Division, Department, or Region (If Applicable)
Board of Supervisors
Designated Agency Contact (Name, Title)
Lee Ann Fergerson, Supervisor’s Assistant
Area Code/Phone Number (510) 272-6691
E-mail leean.fergerson@acgov.org

2. Function or Event Information
Does the agency have a ticket policy? Yes [ ] No [ ]
Face Value of Each Ticket/Pass $ 3000
Event Description
Ticket(s)/Pass(es) provided by agency? Yes [ ] No [ ]
Was ticket distribution made at the behest of agency official? No [ ] Yes [ ]
Date(s) 3/1/14
Name of Source Alameda County Supervisor Scott Haggerty, District 1
If yes: Official’s Name (Last, First)

3. Recipients
* Use Section A to identify the agency’s department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking “Ceremonial Role” or “Other” describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking “Ceremonial Role” or “Other” describe below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Livermore Valley Chamber of Commerce</td>
<td>2</td>
<td>To reward a school or nonprofit organization For its contributions to the community</td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Lee Ann Fergerson
Supervisor’s Assistant

Comment: Provides support for local businesses in Livermore

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
1. Agency Name
Alameda County
Division, Department, or Region (If Applicable)
Board of Supervisors
Designated Agency Contact (Name, Title)
Lee Ann Fergerson, Supervisor's Assistant
Area Code/Phone Number (510) 272-6691
E-mail leeann.fergerson@acgov.org

2. Function or Event Information
Does the agency have a ticket policy? Yes □ No □
Face Value of Each Ticket/Pass $ 350
Event Description WANT □ ONS □ NTS □
Provide File Explanation
Date(s) 2/22/14
Ticket(s)/Pass(es) provided by agency? Yes □ No □
Name of Source
Was ticket distribution made at the behest of agency official? No □ Yes □
If yes: Alameda County Supervisor Scott Haggerty, District 1
Officer's Name (Last, First)

3. Recipients
* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>ERIK LAREDO</td>
<td>1/1</td>
<td>To promote attendance at a county sponsored event in order to maximize potential county revenue 'or concession and parking sales</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role □ Other □ Income □</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee: Lee Ann Fergerson
Print Name: Supervisor's Assistant: 2-5-14

Comment:
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Alameda County
Division, Department, or Region (if Applicable)
Board of Supervisors
Designated Agency Contact (Name, Title)
Lee Ann Fergerson, Supervisor's Assistant
Area Code/Phone Number E-mail
(510) 272-6691 leean.fergerson@acgov.org

2. Function or Event Information
Does the agency have a ticket policy? Yes □ No □ Face Value of Each Ticket/Pass $37.65
Event Description: Disney on Ice
Provide Title/Explanation
Ticket(s)/Pass(es) provided by agency? Yes □ No □ Date(s) 3, 4, 14
Was ticket distribution made at the behest of agency official? No □ Yes □ If no: GSW
If yes: Alameda County Supervisor Scott Haggerty, District 1
Name of Source Official's Name (Last, First)

3. Recipients
A. Name of Agency, Department or Unit Number of Ticket(s)/Pass(es) Describe the public purpose made pursuant to the agency's policy

B. Name of Individual (Last, First) Number of Ticket(s)/Pass(es) Identify one of the following:
Ceremonial Role □ Other □ Income □
If checking "Ceremonial Role" or "Other" describe below:
Ceremonial Role □ Other □ Income □
If checking "Ceremonial Role" or "Other" describe below:

C. Name of Outside Organization (include address and description) Number of Ticket(s)/Pass(es) Describe the public purpose made pursuant to the agency's policy
Jeff Delbaro 8
To promote attendance at a county sponsored event in order to maximize potential county revenue for concession and parking sales

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Lee Ann Fergerson
Supervisor's Assistant
Title
(Month, Day, Year)

Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Alameda County
   Division, Department, or Region (If Applicable)
   Board of Supervisors
   Designated Agency Contact (Name, Title)
   Lee Ann Fergerson, Supervisor's Assistant
   Area Code/Phone Number (510) 272-6691
   E-mail leean.fergerson@acgov.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes □ No □
   Face Value of Each Ticket/Pass $ 350.00
   Event Description Warriors
   Ticket(s)/Pass(es) provided by agency? Yes □ No □
   Date(s) 4/10/14
   Was ticket distribution made at the behest of agency official? No □ Yes □
   Name of Source
   If yes: Alameda County Supervisor Scott Haggerty, District 1
   Officer's Name (Last, First)

3. Recipients
   Use Section A to identify the agency's department or unit. Use Section B to identify an individual. Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit Number of
ticket(s)/Pass(es) Describe the public purpose made pursuant to the agency's policy

   B. Name of Individual (Last, First) Number of
ticket(s)/Pass(es) Identify one of the following:
   Ceremonial Role □ Other □ Income □
   If checking "Ceremonial Role" or "Other" describe below:

   C. Name of Outside Organization (include address and description) Number of
ticket(s)/Pass(es) Describe the public purpose made pursuant to the agency's policy
   To promote attendance at a county sponsored event in order to maximize potential county revenue for concession and parking sales

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head or Designee
   Lee Ann Fergerson Print Name
   Supervisor's Assistant Title
   (Month, Day, Year)

Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Alameda County
Board of Supervisors
Lee Ann Fergerson, Supervisor's Assistant

Area Code/Phone Number: (510) 272-6691
E-mail: leeann.fergerson@acgov.org

2. Function or Event Information
Does the agency have a ticket policy? Yes [ ] No [ ]
Event Description: [ ]
Provide Title/Explanation
Face Value of Each Ticket/Pass $ ______
Date(s): ______
Ticket(s)/Pass(es) provided by agency? Yes [ ] No [ ]
If no: ______
If yes: Alameda County Supervisor Scott Haggerty, District 1
Name of Source

Was ticket distribution made at the behest of agency official? No [ ] Yes [ ]
If yes: ______
Official's Name (Last, First)

3. Recipients
A. Name of Agency, Department or Unit | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency's policy
--- | --- | ---
B. Name of Individual | Number of Ticket(s)/Pass(es) | Identify one of the following:
[ ] To promote attendance at a county sponsored event in order to maximize potential county revenue for concession and parking sales
[ ] Ceremonial Role
[ ] Other
[ ] Income

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee
Lee Ann Fergerson
Print Name
Supervisor's Assistant
Title
Date: Feb 16, 2014
(Month, Day, Year)

Comment: ______
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Alameda County
   Division, Department, or Region (if Applicable)
   Board of Supervisors
   Designated Agency Contact (Name, Title)
   Lee Ann Ferguson, Supervisor's Assistant
   Area Code/Phone Number   E-mail
   (510) 272-6691    leeanne.fergerson@acgov.org

2. Function or Event Information
   Does the agency have a ticket policy?  Yes ☐ No ☐
   Face Value of Each Ticket/Pass $ 157.30
   Event Description  Nicely Cupus
                       Provide File/Explanation
   Date(s)  7/24/14
   Ticket(s)/Pass(es) provided by agency?  Yes ☐ No ☐
   If no:  Name of Source  Name of Source
   If yes:  Alameda County Supervisor Scott Haggerty, District 1
                       Official's Name (Last, First)
   Was ticket distribution made at the behest of agency official?  No ☐ Yes ☑

3. Recipients
   • Use Section A to identify the agency's department or unit.  • Use Section B to identify an individual.  • Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit   Number of Ticket(s)/Pass(es)   Describe the public purpose made pursuant to the agency's policy

   B. Name of Individual (Last, First)   Number of Ticket(s)/Pass(es)   Identify one of the following:
   Ceremonial Role ☐ Other ☐ Income ☐
   If checking "Ceremonial Role" or "Other" describe below:
   Diana Davies
   To promote attendance at a county sponsored event in order to maximize potential county revenue for concession and parking sales

   C. Name of Outside Organization (include address and description)   Number of Ticket(s)/Pass(es)   Describe the public purpose made pursuant to the agency's policy

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

   Signature of Agency Head or Designee
   Lee Ann Ferguson   Supervisor's Assistant
   Print Name   Title
   2-18-14 (Month, Day, Year)

Comment:  

FPPC Form 802 (4/12)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Alameda County
   Division, Department, or Region (if Applicable)
   Board of Supervisors
   Designated Agency Contact (Name, Title)
   Alex Boskovich
   Area Code/Phone Number    E-mail
   (510) 272-6693            alex.boskovich@acgov.org

2. Function or Event Information
   Does the agency have a ticket policy?  Yes ☒  No ☐
   Event Description: Disney on Ice
   Ticket(s)/Pass(es) provided by agency?  Yes ☐  No ☒
   Face Value of Each Ticket/Pass $  37.65
   Date(s)  2 / 28 / 14
   If no: Golden State Warriors
   If yes: Alameda County Supervisor Wilma Chan
   Name of Source
   Official’s Name (Last, First)

3. Recipients
   • Use Section A to identify the agency’s department or unit.  • Use Section B to identify an individual.  • Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency’s policy

   B. Name of Individual
      (Last, First)
      Number of Ticket(s)/Pass(es)
      Ceremonial Role ☐  Other ☐  Income ☐
      If checking “Ceremonial Role” or “Other” describe below:
      To promote attendance at an event held at a County facility in order to maximize potential County revenue from sales.

   C. Name of Outside Organization
      (Include address and description)
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency’s policy

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

   Signature of Agency Head or Designee
   Alex Boskovich  Senior Legislative Aide
   Print Name  Title
   (Month, Day, Year)

Comment:  
FPPC Form 802 (4/12)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Alameda County
   Division, Department, or Region (If Applicable)
   Board of Supervisors
   Designated Agency Contact (Name, Title)
   Alex Boskovich
   Area Code/Phone Number  (510) 272-6693
   E-mail alex.boskovich@acgov.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $37.65
   Event Description Disney on Ice
   Date(s) 3/2/14
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   If no: Golden State Warriors
   Name of Source
   Was ticket distribution made at the behest of agency official? No ☐ Yes ☒
   If yes: Alameda County Supervisor Wilma Chan
   Official's Name (Last, First)

3. Recipients
   ● Use Section A to identify the agency's department or unit.  ● Use Section B to identify an individual.  ● Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit  Number of Ticket(s)/Pass(es)  Describe the public purpose made pursuant to the agency's policy

   B. Name of Individual (First, Last)  Number of Ticket(s)/Pass(es)  Identify one of the following:
   Chang, Emily

   C. Name of Outside Organization (Include address and description)  Number of Ticket(s)/Pass(es)  Describe the public purpose made pursuant to the agency's policy

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee
Alex Boskovich
Senior Legislative Aide
Print Name
Title
2/4/2014
(Foot, Day, Year)

Comment:  

FPPC Form 802 (4/12)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Alameda County

Division, Department, or Region (If Applicable)
Board of Supervisors

Designated Agency Contact (Name, Title)
Alex Boskovich

Area Code/Phone Number E-mail
(510) 272-6693 alex.boskovich@acgov.org

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

2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No ☐

Face Value of Each Ticket/Pass $ ¿ 23.85

Event Description Disney on Ice
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑

If no: Golden State Warriors
Name of Source

Was ticket distribution made at the behest of agency official? No ☐ Yes ☑

If yes: Alameda County Supervisor Wilma Chan
Official's Name (Last, First)

3. Recipients
* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit
Number of Ticket(s)/ Pass(es)
Describe the public purpose made pursuant to the agency's policy

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/ Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

B. Name of Individual (Last, First)
Number of Ticket(s)/ Pass(es)
Identify one of the following:

<table>
<thead>
<tr>
<th>Name of Individual</th>
<th>Number of Ticket(s)/ Pass(es)</th>
<th>Ceremonial Role</th>
<th>Other</th>
<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Harncharjev, Penny</td>
<td>4</td>
<td>Ceremonial Role</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

C. Name of Outside Organization (Include address and description)
Number of Ticket(s)/ Pass(es)
Describe the public purpose made pursuant to the agency's policy

<table>
<thead>
<tr>
<th>Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/ Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee
Alex Boskovich
Print Name
Senior Legislative Aide
Title
(Month, Day, Year)

Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Alameda County
   Division, Department, or Region (If Applicable)
   Board of Supervisors
   Designated Agency Contact (Name, Title)
   Alex Boskovich
   Area Code/Phone Number (510) 272-6693
   E-mail alex.boskovich@acgov.org
   Date Stamp

   Amendment (Must provide explanation in Part 3.)
   Date of Original Filing: (Month, Day, Year)

2. Function or Event Information
   Does the agency have a ticket policy? Yes [X] No [ ]
   Face Value of Each Ticket/Pass $ 200/$30
   Event Description Warriors vs. Suns
   Date(s) 3 / 9 / 14
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [X]
   Name of Source Golden State Warriors
   Was ticket distribution made at the behest of agency official? No [ ] Yes [X]
   Name of Source Alameda County Supervisor Wilma Chan
   Official's Name (Last, First)

3. Recipients
   Use Section A to identify the agency's department or unit. Use Section B to identify an individual. Use Section C to identify an outside organization.
   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy

   B. Name of Individual
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy
      Identify one of the following:
      Ceremonial Role [ ] Other [ ] Income [ ]
      If checking "Ceremonial Role" or "Other" describe below:
      To promote attendance at an event held at a County facility in order to maximize potential County revenue from sales.

   C. Name of Outside Organization
      (Include address and description)
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 16942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head or Designee
   Print Name
   Title
   Date (Month, Day, Year)
   Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Alameda County
   Board of Supervisors
   Designated Agency Contact (Name, Title)
   Alex Boskovich
   Area Code/Phone Number (510) 272-6693
   E-mail alex.boskovich@acgov.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Event Description Miley Cyrus concert
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   Was ticket distribution made at the behest of agency official? No ☐ Yes ☑
   Face Value of Each Ticket/Pass $157.30
   Date(s) 2 / 24 / 14
   Name of Source Golden State Warriors
   Name of Source Alameda County Supervisor Wilma Chan
   Official's Name (Last, First)

3. Recipients
   • Use Section A to identify the agency's department or unit.
   • Use Section B to identify an individual.
   • Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

| B. Name of Individual               | Number of Ticket(s)/Pass(es) | Identify one of the following:
|-------------------------------------|-----------------------------|----------------------------------------------------------------|
| Cardenas, Martha                    | 4                           | Ceremonial Role ☐ Other ☐ Income ☐
|                                     |                             | To promote attendance at an event held at a County facility in order to maximize potential County revenue from sales. |
|                                     |                             | Ceremonial Role ☐ Other ☐ Income ☐
|                                     |                             | If checking "Ceremonial Role" or "Other" describe below: |
|                                     |                             |                                                                |

<table>
<thead>
<tr>
<th>C. Name of Outside Organization</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>(include address and description)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee

Alex Boskovich
Senior Legislative Aide

Print Name
Title
(Month, Day, Year)

Comment: FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Alameda County

   Division, Department, or Region (If Applicable)
   Board of Supervisors

   Designated Agency Contact (Name, Title)
   Alex Boskovich

   Area Code/Phone Number E-mail
   (510) 272-6693 alex.boskovich@acgov.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $ 41.30
   Event Description Monster Jam truck show
   Date(s) 2 / 22 / 14
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   If no: Golden State Warriors
   Name of Source
   If yes: Alameda County Supervisor Wilma Chan
   Official's Name (Last, First)

3. Recipients
   • Use Section A to identify the agency's department or unit.
   • Use Section B to identify an individual.
   • Use Section C to identify an outside organization.

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<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reyes, Rocio</td>
<td>4</td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>To promote attendance at an event held at a County facility in order to maximize potential County revenue from sales.</td>
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<tr>
<th>Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
</table>

4. Verification
   I have read and understood FPPC Regulations 18941.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Alex Boskovich
   Signature of Agency Head or Designee
   Print Name
   Senior Legislative Aide
   Title
   2/19/14
   (Month, Day, Year)

Comment: 
**Agency Report of:**
**Ceremonial Role Events and Ticket/Pass Distributions**

1. **Agency Name**
   Alameda County

   **Division, Department, or Region (If Applicable)**
   Board of Supervisors

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

   **Area Code/Phone Number** (510) 272-6693
   **E-mail** alex.boskovich@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 or Event Information**
   - **Does the agency have a ticket policy?** Yes [x] No [ ]
   - **Face Value of Each Ticket/Pass** $300
   - **Event Description** Warriors vs. Mavericks
     **Provide Title/Explanation**
   - **Date(s)** 3 / 11 / 14
   - **Ticket(s)/Pass(es) provided by agency?** Yes [ ] No [x]
   - **If no:** Golden State Warriors
     **Name of Source**
   - **Was ticket distribution made at the behest of agency official?** No [ ] Yes [x]
     **If yes:** Alameda County Supervisor Wilma Chan
     **Official's Name (Last, First)**

3. **Recipients**
   - Use Section A to identify the agency's department or unit.
   - Use Section B to identify an individual.
   - Use Section C to identify an outside organization.

<table>
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<tr>
<th>A. Name of Agency, Department or Unit</th>
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<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Russo, John</td>
<td>2</td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></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>
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<th>C. Name of Outside Organization (include address and description)</th>
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<th>Describe the public purpose made pursuant to the agency's policy</th>
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</table>

4. **Verification**
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

   **Signature of Agency Head or Designee**
   Alex Boskovich
   **Print Name**
   Senior Legislative Aide
   **Title**
   2/20/14
   **(Month, Day, Year)**

   **Comment:**
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Alameda County
   Division, Department, or Region (If Applicable)
   Board of Supervisors
   Designated Agency Contact (Name, Title)
   Alex Boskovich
   Area Code/Phone Number E-mail
   (510) 272-6693 alex.boskovich@acgov.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $ 200
   Event Description Warriors vs. Hawks
   Date(s) 3 / 7 / 14
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   If no: Golden State Warriors
   Name of Source
   If yes: Alameda County Supervisor Wilma Chan
   Official's Name (Last, First)

3. Recipients
   • Use Section A to identify the agency's department or unit.
   • Use Section B to identify an individual.
   • Use Section C to identify an outside organization.
   - A. Name of Agency, Department or Unit
     Number of Ticket(s)/Pass(es)
     Describe the public purpose made pursuant to the agency's policy

   - B. Name of Individual (Last, First)
     Number of Ticket(s)/Pass(es)
     Identify one of the following:
     Ceremonial Role ☐ Other ☐ Income ☐
     To promote attendance at an event held at a County facility in order to maximize potential County revenue from sales.
     Ceremonial Role ☐ Other ☐ Income ☐
     If checking "Ceremonial Role" or "Other" describe below:

   - C. Name of Outside Organization (include address and description)
     Number of Ticket(s)/Pass(es)
     Describe the public purpose made pursuant to the agency's policy

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head or Designee
   Alex Boskovich
   Senior Legislative Aide
   Print Name Title
   2/19/14 (Month, Day, Year)
   Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
1. Agency Name
   Alameda County
   Division, Department, or Region (If Applicable)
   Board of Supervisors
   Designated Agency Contact (Name, Title)
   Alex Boskovich
   Area Code/Phone Number (510) 272-6693
   E-mail alex.boskovich@acgov.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Event Description Warriors vs. Bulls
   Face Value of Each Ticket/Pass $ 550/$30 park
   Date(s) 2/6/14
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   If no: Golden State Warriors
   Name of Source
   Was ticket distribution made at the behest of agency official? No ☐ Yes ☑
   If yes: Alameda County Supervisor Wilma Chan
   Official’s Name (Last, First)

3. Recipients
   • Use Section A to identify the agency’s department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.
   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency’s policy

   B. Name of Individual
      Number of Ticket(s)/Pass(es)
      Identify one of the following:
      Ceremonial Role ☐ Other ☐ Income ☐
      If checking “Ceremonial Role” or “Other” describe below:
      To promote attendance at an event held at a County facility in order to maximize potential County revenue from sales.

   C. Name of Outside Organization
      (include address and description)
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency’s policy

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head or Designee Alex Boskovich Senior Legislative Aide 2/4/14
   (Month, Day, Year)
   Comment:
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Alameda County

Division, Department, or Region (if Applicable)
Board of Supervisors

Designated Agency Contact (Name, Title)
Alex Boskovich

Area Code/Phone Number E-mail
(510) 272-6693 alex.boskovich@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 or Event Information

Does the agency have a ticket policy? Yes ☑ No ☐

Face Value of Each Ticket/Pass $550

Event Description Warriors vs. Bulls

Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑

Date(s) 2 / 6 / 14 /

If no: Golden State Warriors

Name of Source

Was ticket distribution made at the behest of agency official? No ☐ Yes ☑

Official’s Name (Last, First)

Alameda County Supervisor Wilma Chan

3. Recipients

- Use Section A to identify the agency’s department or unit. □ Use Section B to identify an individual. □ Use Section C to identify an outside organization.

<table>
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<tr>
<th>A. Name of Agency, Department or Unit</th>
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<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Silva, Ron</td>
<td>3</td>
<td>Ceremonial Role ☑ Other ☐ Income ☐</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
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4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Alex Boskovich
Senior Legislative Aide

Signature of Agency Head or Designee
Print Name

2/4/14 (Month, Day, Year)

Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/276-7772)
Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name  
Alameda County  

Division, Department, or Region (If Applicable)  
Board of Supervisors  
Designated Agency Contact (Name, Title)  
Alex Boskovitch  
Area Code/Phone Number (510) 272-6693  
E-mail alex.boskovitch@acgov.org  

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

2. Function or Event Information  

| Does the agency have a ticket policy? | Yes ☑ No ☐ | Face Value of Each Ticket/Pass $ | 200 |
| Event Description | Warriors vs. Hawks | Date(s) 3 / 7 / 14 |  
| Ticket(s)/Pass(es) provided by agency? | Yes ☑ No ☐ | Name of Source  
If no: Golden State Warriors |
| Was ticket distribution made at the behest of agency official? | No ☑ Yes ☐ | If yes: Alameda County Supervisor Wilma Chan  
Official's Name (Last, First) |

3. Recipients  

- Use Section A to identify the agency's department or unit.  
- Use Section B to identify an individual.  
- Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit  
Describe the public purpose made pursuant to the agency's policy

B. Name of Individual (Last, First)  
Number of Ticket(s)/Pass(es)  
Identify one of the following:  
Ceremonial Role ☐ Other ☐ Income ☐  
If checking "Ceremonial Role" or "Other" describe below:

Wu, Tony  
2  
To promote attendance at an event held at a County facility in order to maximize potential County revenue from sales.

C. Name of Outside Organization (Include address and description)  
Number of Ticket(s)/Pass(es)  
Describe the public purpose made pursuant to the agency's policy

4. Verification  
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee  
Alex Boskovitch  
Print Name  
Senior Legislative Aide  
Toll (Month, Day, Year)  
2/13/14

Comment:  

FPPC Form 802 (4/12)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name  
Alameda County  

Division, Department, or Region (If Applicable)  
Board of Supervisors

Designated Agency Contact (Name, Title)  
Alex Boskovich

Area Code/Phone Number  E-mail  
(510) 272-6693 alex.boskovich@acgov.org

Date Stamp  

Amendment (Must provide explanation in Part 3.)

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

2. Function or Event Information  
Does the agency have a ticket policy?  Yes ☑ No ☐  
Face Value of Each Ticket/Pass $ __________ 10

Event Description  
A's Fan Fest 2014

Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency?  Yes ☐ No ☑  
If no: Oakland Athletics

Name of Source

Was ticket distribution made at the behest of agency official?  No ☐ Yes ☑  
If yes: Alameda County Supervisor Wilma Chan

Official's Name (Last, First)

3. Recipients  
• Use Section A to identify the agency’s department or unit.  • Use Section B to identify an individual.  • Use Section C to identify an outside organization.

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<thead>
<tr>
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<th>Identify one of the following:</th>
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</thead>
<tbody>
<tr>
<td>Cravahlo, Brian</td>
<td>2</td>
<td>Ceremonial Role ☑ Other ☐ Income ☑</td>
</tr>
</tbody>
</table>

If checking "Ceremonial Role" or "Other" describe below:

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

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<th>C. Name of Outside Organization (Include address and description)</th>
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Alex Boskovich  
Senior Legislative Aide

Signature of Agency Head or Designee  
Print Name  
Title  
(Month, Day, Year)

Comment: 

FPPC Form 802 (4/12)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/276-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Alameda County
   Board of Supervisors
   Designated Agency Contact (Name, Title)
   Alex Boskovich
   Area Code/Phone Number (510) 272-6693
   E-mail alex.boskovich@acgov.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No □ Face Value of Each Ticket/Pass $ 84.15
   Event Description WWE Live wrestling
   Date(s) 2 / 7 / 14
   Ticket(s)/Pass(es) provided by agency? Yes ☑ No □
   If no: Golden State Warriors
   Name of Source
   Was ticket distribution made at the behest of agency official? Yes ☑ No □
   If yes: Alameda County Supervisor Wilma Chan
   Official's Name (Last, First)

3. Recipients
   • Use Section A to identify the agency's department or unit.
   • Use Section B to identify an individual.
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<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
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<tr>
<th>Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>San Leandro Boys &amp; Girls Club, 401 Marina Blvd, San Leandro, CA 94577</td>
<td>4</td>
<td>To provide reward a non-profit for its contributions to low-income and immigrants living in Alameda County.</td>
</tr>
<tr>
<td>Provides youth development and educational programs in San Leandro.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head or Designee	Alex Boskovich	Senior Legislative Aide	2/5/14
   Print Name	Title	(Month, Day, Year)
   Comment:
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Alameda County
   Division, Department, or Region (If Applicable)
   Board of Supervisors
   Designated Agency Contact (Name, Title)
   Alex Boskovich
   Area Code/Phone Number (510) 272-6693
   E-mail alex.boskovich@acgov.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Face Value of Each Ticket/Pass $550/$30 park
   Event Description Warriors vs. Bulls
   Event Date(s) 2/6/14
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   Name of Source Golden State Warriors
   Was ticket distribution made at the behest of agency official? Yes ☑ No ☐
   Official's Name (Last, First) Alameda County Supervisor Wilma Chan

3. Recipients
   • Use Section A to identify the agency's department or unit.
   • Use Section B to identify an individual.
   • Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit
   Number of Ticket(s)/Pass(es)
   Describe the public purpose made pursuant to the agency's policy

   B. Name of Individual (Last, First)
   Number of Ticket(s)/Pass(es)
   Ceremonial Role ☐ Other ☐ Other ☐
   Income ☐
   Identify one of the following:
   To promote attendance at an event held at a County facility in order to maximize potential County revenue from sales.

   C. Name of Outside Organization (include address and description)
   Number of Ticket(s)/Pass(es)
   Describe the public purpose made pursuant to the agency's policy

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

   Signature of Agency Head or Designee

   Print Name

   Title

   (Month, Day, Year)

   Comment:

   FPPC Form 802 (4/12)
   FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agencies Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Alameda County

Division, Department, or Region (If Applicable)

Board of Supervisors

Designated Agency Contact (Name, Title)

Alex Boskovich

Area Code/Phone Number E-mail
(510) 272-6693 alex.boskovich@acgov.org

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

2. Function or Event Information
   Does the agency have a ticket policy? Yes [x] No [ ]
   Face Value of Each Ticket/Pass $: 550/$30 park
   Event Description: Warriors vs. Bulls
   Date(s): 2 / 6 / 14
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [x]
   If no: Golden State Warriors
   Name of Source
   Was ticket distribution made at the behest of agency official? No [ ] Yes [x]
   If yes: Alameda County Supervisor Wilma Chan
   Official's Name (Last, First)

3. Recipients
   • Use Section A to identify the agency's department or unit.
   • Use Section B to identify an individual.
   • Use Section C to identify an outside organization.

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</table>

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<thead>
<tr>
<th>B. Name of Individual</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thorne, Andrew</td>
<td>3/park</td>
<td></td>
</tr>
<tr>
<td>Ceremonial Role [ ]</td>
<td>Other [ ]</td>
<td>Income [ ]</td>
</tr>
<tr>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
<td></td>
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<td>To promote attendance at an event held at a County facility in order to maximize potential County revenue from sales.</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>(include address and description)</td>
<td></td>
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</tr>
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</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee

Alex Boskovich

Print Name

Senior Legislative Aide

Title

Date: 2/4/14

(Forty Day, Year)

Comment: 

FPPC Form 802 (4/12)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
# Agency Report of:
## Ceremonial Role Events and Ticket/Pass Distributions

### 1. Agency Name
- **Alameda County**
  - **Division, Department, or Region (If Applicable)**
  - **Board of Supervisors**
  - **Designated Agency Contact (Name, Title)**
  - **Alex Boskovich**

- **Area Code/Phone Number** (510) 272-6693
- **E-mail** alex.boskovich@acgov.org

### 2. Function or Event Information
- **Does the agency have a ticket policy?** Yes ☑ No ☐
- **Face Value of Each Ticket/Pass $** 550/$30 park
- **Event Description** Warriors vs. Bulls
- **Provide Title/Explanation**
- **Ticket(s)/Pass(es) provided by agency?** Yes ☐ No ☑
- **Was ticket distribution made at the behest of agency official?** No ☐ Yes ☑
- **Date(s)** 2/6/14
- **Name of Source** Golden State Warriors
- **Official's Name (Last, First)** Alameda County Supervisor Wilma Chan

### 3. Recipients
*Use Section A to identify the agency's department or unit. *Use Section B to identify an individual. *Use Section C to identify an outside organization.*

#### A. Name of Agency, Department or Unit
- **Number of Ticket(s)/Pass(es)**
- **Describe the public purpose made pursuant to the agency's policy**

#### B. Name of Individual
- **Name of Individual (Last, First)** Dietlien, Tracey
- **Number of Ticket(s)/Pass(es)** 3/park
- **Ceremonial Role** ☑ Other ☐
- **Income** ☐
- **If checking “Ceremonial Role” or “Other” describe below:** To promote attendance at an event held at a County facility in order to maximize potential County revenue from sales.

#### C. Name of Outside Organization
- **Number of Ticket(s)/Pass(es)**
- **Describe the public purpose made pursuant to the agency's policy**

### 4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

- **Signature of Agency Head or Designee**
- **Print Name** Alex Boskovich
- **Title** Senior Legislative Aide
- **Date** 2/4/14

**Comment:**
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Alameda County
   Division, Department, or Region (If Applicable)
   Board of Supervisors
   Designated Agency Contact (Name, Title)
   Alex Boskovich
   Area Code/Phone Number E-mail
   (510) 272-6693 alex.boskovich@acgov.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Event Description Warriors vs. Bulls
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   Was ticket distribution made at the behest of agency official? No ☐ Yes ☒
   Face Value of Each Ticket/Pass $ 550
   Date(s) 2 / 6 / 14

3. Recipients
   • Use Section A to identify the agency's department or unit.
   • Use Section B to identify an individual.
   • Use Section C to identify an outside organization.
   A. Name of Agency, Department or Unit
   Number of Ticket(s)/Pass(es)
   Describe the public purpose made pursuant to the agency's policy

   B. Name of Individual
   (Last, First)
   Number of Ticket(s)/Pass(es)
   Ceremonial Role ☐ Other ☐ Income ☐
   If checking "Ceremonial Role" or "Other" describe below:
   To reward a County employee for her exemplary service to the public and to encourage staff development.

   C. Name of Outside Organization
   (Include address and description)
   Number of Ticket(s)/Pass(es)
   Describe the public purpose made pursuant to the agency's policy

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head or Designee
   Alex Boskovich
   Senior Legislative Aide
   Title
   Signature
   Date (Month, Day, Year)
   2/4/14
   Comment:

   FPPC Form 802 (4/12)
   FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Alameda County
Division, Department, or Region (if Applicable)
Board of Supervisors
Designated Agency Contact (Name, Title)
Alex Boskovich
Area Code/Phone Number (510) 272-6693
E-mail alex.boskovich@acgov.org

2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No ☐ Face Value of Each Ticket/Pass $ 550
Event Description Warriors vs. Bulls
Provide Title/Explanation [ ]
Date(s) 2 / 6 / 14
Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐ If no: Golden State Warriors
Name of Source
Was ticket distribution made at the behest of agency official? No ☑ Yes ☑ If yes: Alameda County Supervisor Wilma Chan
Official's Name (Last, First)

3. Recipients
* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

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<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
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<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jones, Steven</td>
<td>1</td>
<td>Ceremonial Role ☐ Other ☐ Income ☑</td>
</tr>
<tr>
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<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
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Signature of Agency Head or Designee Alex Boskovich Senior Legislative Aide
Print Name Title
2/4/14 (Month, Day, Year)

Comment: 
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Alameda County
   Division, Department, or Region (If Applicable)
   Board of Supervisors
   Designated Agency Contact (Name, Title)
   Alex Boskovich

Area Code/Phone Number  E-mail
(510) 272-6693  alex.boskovich@acgov.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $ 37.65
   Event Description Disney on Ice
   Event Date(s) 2 / 27 / 14
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   Name of Source
   Ticket(s)/Pass(es) made at the behest of agency official? No ☐ Yes ☒
   Name of Source

3. Recipients
   * Use Section A to identify the agency's department or unit.
   * Use Section B to identify an individual.
   * Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit
   Number of Ticket(s)/Pass(es)
   Describe the public purpose made pursuant to the agency's policy

B. Name of Individual
   Last, First
   Number of Ticket(s)/Pass(es)
   Identify one of the following:
   Ceremonial Role ☐ Other ☐ Income ☐
   If checking "Ceremonial Role" or "Other" describe below:
   To promote attendance at an event held at a County facility in order to maximize potential County revenue from sales.

C. Name of Outside Organization
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