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 ☑
   Event Description: WARRIORS
   Provide Title/Explanation
   Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐
   Face Value of Each Ticket/Pass $200.00
   Date(s) 1/1/16
   If no: (GSW) Name of Source
   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
   Number of Ticket(s)/Pass(es)
   Identity 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 ☐
   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
   Lee Ann Fergerson Supervisor's Assistant
   Print Name (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 Ferguson, Supervisor's Assistant

Area Code/Phone Number
(510) 272-6891

E-mail
leann.fergerson@acgov.org

Date Stamp

California Form 802

A Public Document

For Official Use Only

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:

1. Mindy Chackola 2
   - To promote attendance at a county sponsored event in order to maximize potential county revenue for concession and parking sales.

2. Paul Brouse 2
   - 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

---

I have verified that the distribution set forth above, is in accordance with the requirements.

Lee Ann Ferguson
Supervisor's Assistant

Date: 12/6/15

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 Ferguson, Supervisor's Assistant
Area Code/Phone Number (510) 272-6691
Email leann.fergerson@ao.gov.org

2. Function or Event Information
Does the agency have a ticket policy? Yes ☐ No ☐
Event Description: Miami Heat Basketball
Face Value of Each Ticket/Pass $700.00
Date(s) 1/11/16
If no: GSW
Name of Source
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.

<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>District 1</td>
<td>1</td>
<td>To reward a county employee for his or her exemplary service to the public</td>
</tr>
</tbody>
</table>

<table>
<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></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>
<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, Lee Ann Ferguson, Supervisor's Assistant, certify that the distribution set forth above is in accordance with the requirements.

Print name: Lee Ann Ferguson
Title: Supervisor’s Assistant
Date: 11/10/15

FPPC Form 802 (4/12)
PCC 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 leeanne.fergerson@acgov.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☐ No ☐
   Event Description WARRIORS
   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 $ 450.00
   Date(s) 11/9/15

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>
</table>

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Ceremonial Role ☐ Other ☐ Income ☐ Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Laura Winter</td>
<td>2</td>
<td>To promote attendance at a county sponsored event in order to maximize potential county revenue for concession and parking 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>
</table>

4. Verification
   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
   Print Name                      Title
   10/19/15 (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**

(510) 272-6691

**E-mail**

leeann.fergerson@acgov.org

**Date Stamp**

**California Form 802**

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**Amendment**

[ ] 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 $ [ ]

Event Description: [Warriors/Law & Order]

Provided Title/Explaination: [ ]

Date(s): [3/1/10]

If no: [GSO]

Ticket(s)/Pass(es) provided by agency?

Yes [ ] No [ ]

Was ticket distribution made at the behest of agency official?

No [ ] Yes [x]

Name of Source: Alameda County Supervisor Scott Haggerty, D 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

<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>Distinct 1</td>
<td>4/1</td>
<td>To reward a County employee for his or her exemplary service to the public or to encourage staff development</td>
</tr>
</tbody>
</table>

#### B. Name of Individual (Last, First)

<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></td>
<td></td>
<td>Ceremonial Role [ ] Other [ ]</td>
</tr>
</tbody>
</table>
|                                  |                             | Income [ ]

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

#### C. Name of Outside Organization (Include address and description)

<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>
</table>

---

4. I have verified that the distribution set forth above, is in accordance with the requirements.

Lee Ann Ferguson, Supervisor's Assistant

Print Name

(510) 272-6691

Supervisor's Assistant

Title

(Month, Day, Year)

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)  
Michelle Archuleta

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

Date Stamp  
California Form 802  
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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 ☐

Event Description  
Warriors vs. Denver Nuggets

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 $ 350.00

Date(s) 01/02/16

If no: Golden State Warriors

If yes: Valle, Richard- Supervisor District 2

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 reward a community volunteer for her service to the public.

Baldwin, Shane

Number of Ticket(s)/Pass(es) 2

To promote health, motivate & provide expanded opportunities to vulnerable populations in the County such as the underprivileged

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. Validation  
I have verified that the distribution set forth above, is in accordance with the requirements.

Michelle Archuleta  
Director of Operations

Print Name  
Title

12/17/15 (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)
Michelle Archuleta

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

### 2. Function or Event Information

- **Does the agency have a ticket policy?** Yes [x] No [ ]
- **Face Value of Each Ticket/Pass** $94.00
- **Event Description** POP NYE
- **Date(s)** 12 / 31 / 15
- **Ticket(s)/Pass(es) provided by agency?** Yes [ ] No [x]
- **If yes:** Golden State Warriors
- **Name of Source**
- **Was ticket distribution made at the behest of agency official?** No [ ] Yes [x]
- **If yes:** Vale, Richard - Supervisor District 2
- **Official's Name (Last, First)**

### 3. Recipients

**A. Name of Agency, Department or Unit**

<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>Clerk of the Board</td>
<td>4</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>

**B. Name of Individual**

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

**C. Name of Outside Organization**

<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>
</table>

### 4. Verification

I, [Name], have verified that the distribution set forth above, is in accordance with the requirements.

**Michelle Archuleta**
Print Name: Director of Operations
Title: 12/17/15 (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)
Michelle Archuleta

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

Date Stamp [California Form 802]
Form 802
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□ 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 $ 75.00

Event Description Muse Concert

Provide Title/Explanation

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

Date(s) 12/15/15

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>Valle, Monica</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>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>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></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Verification

I have verified that the distribution set forth above, is in accordance with the requirements.

Michelle Archuleta Director of Operations
Print Name Title

(12/14/15) (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 Archuleta  
**Area Code/Phone Number** (510) 272-6692  
**E-mail** michelle.archuleta@acgov.org  
**Date Stamp**

#### 2. Function or Event Information
- **Does the agency have a ticket policy?** Yes ☒ No ☐
- **Event Description** Not So Silent Night 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 ☒

<table>
<thead>
<tr>
<th>Face Value of Each Ticket/Pass $</th>
<th>114.30</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Date(s)</strong></td>
<td>12/11/15</td>
</tr>
<tr>
<td><strong>Name of Source</strong></td>
<td>Golden State Warriors</td>
</tr>
<tr>
<td><strong>Name of Source (Last, First)</strong></td>
<td>Valle, Richard- Supervisor District 2</td>
</tr>
</tbody>
</table>

#### 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

<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

<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>Dihn, Mike</td>
<td>4</td>
<td></td>
<td></td>
<td></td>
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<td></td>
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</tr>
</tbody>
</table>

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

##### C. Name of Outside Organization (Include address and description)

<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
- **I have verified that the distribution set forth above, is in accordance with the requirements.

Michelle Archuleta  
**Director of Operations** (510) 272-6692  
**Date** 12/11/15  
**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 Archuleta

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

Date Stamp
California Form 802
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□ 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 $ 100.00

Event Description  The Weeknd Concert

Provide Title/Explanation

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

Date(s) 12 / 5 / 15

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)

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 (Yes, Yes)  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 revenue from sales.

Ceremonial Role ☐ Other ☐ Income ☐

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

4. Verification

I have verified that the distribution set forth above, is in accordance with the requirements.

Michelle Archuleta  Director of Operations

Print Name  Title

(Month, Day, Year)

944.1 and 19942. I have verified that the distribution set forth above, is in accordance with the requirements.

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)
   Michelle Archuleta

   Area Code/Phone Number
   (510) 272-6692

   E-mail
   michelle.archuleta@acgov.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Face Value of Each Ticket/Pass $ 139.50
   Event Description
   Wild 94.9 Jungle Ball Concert
   Date(s) 12 / 3 / 15

   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   If no: Golden State Warriors
   Name of Source
   If yes: Vallie, 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 ☐
   If checking “Ceremonial Role” or “Other” describe below:
   Gonzalez, Daniel
   4
   To promote attendance at an event held at a County facility in order to maximize potential revenue from sales.

   4
   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
   14.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

   Michelle Archuleta Director of Operations
   Print Name Title
   12/11/15 (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)
Michelle Archuleta
Area Code/Phone Number (510) 272-6692
E-mail michelle.archuleta@acgov.org

2. Function or Event Information
Does the agency have a ticket policy? Yes ☒ No ☐
Face Value of Each Ticket/Pass $ 75.00
Event Description Muse Concert
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: 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>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>Douglas, Simon</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 revenue from sales.</td>
</tr>
<tr>
<td></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>
</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

4.1 and 16942. I have verified that the distribution set forth above, is in accordance with the requirements.

Michelle Archuleta
Director of Operations
Print Name
Title

Date: 12/9/15

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)
Steven Jones

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

2. Function or Event Information
Does the agency have a ticket policy? Yes ☒ No ☐
Face Value of Each Ticket/Pass $ 600
Event Description Basketball Game
Date(s) 12 / 16 / 15
Provided Title/Explanation
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
If no: Golden State Warriors
If yes: Alameda County Supervisor Wilma Chan
Name of Source
Name of Agency (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>Vella, Malia</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: To promote attendance at an event held at a County facility in order to maximize potential County revenue from sales.</td>
</tr>
<tr>
<td></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>
</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></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
Steven Jones
Print Name
Central District Director
Title
12.22.2015
(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) | Steven Jones |
| Area Code/Phone Number | (510) 272-6693 |
| E-mail | steven.jones@acgov.org |

| 2. Function or Event Information | Does the agency have a ticket policy? Yes ☒ No ☐ |
| Event Description | Jingle Ball |
| 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) |

| Date(s) | 12 / 03 / 15 |
| Face Value of Each Ticket/Pass (in $) | $139.50 |

| 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: |
| McCormack, Michael | 4 | 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. |
| | 4 | 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. |
| Steven Jones | Central District Director |
| Print Name | Title |
| (Month, Day, Year) | 12.22.2015 |

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)
Steven Jones
Area Code/Phone Number E-mail
(510) 272-6693 steven.jones@acgov.org

**2. Function or Event Information**
Does the agency have a ticket policy? Yes ☑ No ☐
Face Value of Each Ticket/Pass $ $350 / $30 parking
Event Description Basketball Game
Provide Title/Explanation
Date(s) 12 / 28 / 15
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
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.

<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</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hiscox, Elyzabeth</td>
<td>4+1park</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>
<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>4+1park</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></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**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.

Steven Jones Central District Director 12.22.2015
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)
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) 
Steven Jones
Area Code/Phone Number (510) 272-6693 E-mail steven.jones@acgov.org

2. Function or Event Information 
Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass $ $600
Event Description Basketball Game Date(s) 12 / 16 / 15
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)
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)

B. Name of Individual (Last, First)
Number of Ticket(s)/Pass(es)

C. Name of Outside Organization (Include address and description)
Number of Ticket(s)/Pass(es)

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
Steven Jones Central District Director 12.22.2015
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
   Board of Supervisors
   Designated Agency Contact (Name, Title)
   Steven Jones
   Area Code/Phone Number (510) 272-6693
   E-mail steven.jones@acgov.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $500/$30 parking
   Event Description Basketball Game
   Date(s) 12 / 18 / 15
   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.

<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>

<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>
<th>Ceremonial Role ☐</th>
<th>Other ☐</th>
<th>income ☐</th>
</tr>
</thead>
<tbody>
<tr>
<td>Waters, Donald</td>
<td>2+1park</td>
<td>To promote attendance at an event held at a County facility in order to maximize potential County revenue from sales.</td>
<td>Ceremonial Role ☐</td>
<td>Other ☐</td>
<td>Income ☐</td>
</tr>
<tr>
<td></td>
<td>2+1park</td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
<td>Ceremonial Role ☐</td>
<td>Other ☐</td>
<td>Income ☐</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>
</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
   Central District Director
   12.22.2015
   (Month, Day, Year)

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

1. Agency Name
   Alameda County
   
2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Event Description: Basketball Game
   Face Value of Each Ticket/Pass $350/$30 parking
   Date(s) 12/23/15
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   If no: Golden State Warriors
   If yes: Alameda County Supervisor Wilma Chan
   Was ticket distribution made at the behest of agency official? Yes ☒ No ☐

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:
   - Ceremonial Role ☐ Other ☐ Income ☐
     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: Steven Jones
   Date: 12.22.2015
   Title: Central District Director
   
   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)
   Steven Jones
   Area Code/Phone Number (510) 272-6693
   E-mail steven.jones@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 $350
   Date(s) 12 / 23 / 15
   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:
   Albert, Peter | 2 | 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.

Steven Jones
Central District Director
12.22.2015

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)
   Steven Jones
   Area Code/Phone Number E-mail
   (510) 272-6693 steven.jones@acgov.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass $94.00
   Event Description POP NYE Date(s) 12 / 31 / 15
   Provide Title/Explanation
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: Golden State Warriors
   Was ticket distribution made at the behest of agency official? No ☐ Yes ☒ If yes: 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) Identify one of the following:
      \[ \text{Ceremonial Role} \quad \text{Other} \quad \text{Income} \]
      \[ \text{If checking "Ceremonial Role" or "Other" describe below:} \]
      \[ \text{To promote attendance at an event held at a County facility in order to maximize potential County revenue from sales.} \]
      \[ \text{Ceremonial Role} \quad \text{Other} \quad \text{Income} \]
      \[ \text{If checking "Ceremonial Role" or "Other" describe below:} \]
   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 16444.1 and 16442. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head or Designee: Steven Jones Central District Director 12.22.2015
   (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)
   Steven Jones

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

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Face Value of Each Ticket/Pass $ $75
   Event Description MUSE
   Provide Title/Explanation
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   Date(s) 12 / 15 / 15
   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 (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.
   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: Steven Jones
   Print Name: Central District Director
   Date: 12.22.2015
   Title

   Comment:

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)**

Steven Jones

**Area Code/Phone Number**

(510) 272-6693

**E-mail**

steven.jones@acgov.org

### 2. Function or Event Information

- **Does the agency have a ticket policy?** Yes ☒ No ☐
- **Face Value of Each Ticket/Pass $** $139.50
- **Event Description** Jingle Ball
  - **Provide Title/Explanation**
- **Date(s)**
  - 12 / 03 / 15
- **Ticket(s)/Pass(es) provided by agency?** Yes ☐ No ☒
- **Name of Source**
  - If no: Golden State Warriors
  - 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

<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

<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>McCormack, Mike</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 sales.</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
</tbody>
</table>

#### C. Name of Outside Organization

<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**
  - Steven Jones
  - Central District Director
  - 12.22.2015

**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)
Steven Jones

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

2. Function or Event Information
Does the agency have a ticket policy? Yes ☒ No ☐
Face Value of Each Ticket/Pass $ $100.00
Event Description The Weekend featuring Travis Scott
Date(s) 12 / 05 / 15
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.

<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 ☐</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 ☐</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>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>Restorative Justice for Oakland Youth 1203 Preservation Park Way Suite 200</td>
<td>4</td>
<td>To reward a school or nonprofit organization for its contributions to the community</td>
</tr>
<tr>
<td>reduces racial disparities and public costs associated with incarceration</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Verification
I have read and understood 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: Steven Jones  Central District Director:  12.22.2015

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

1. Agency Name
   Alameda County
   Board of Supervisors

Designated Agency Contact (Name, Title)
   Steven Jones
   Area Code/Phone Number  (510) 272-6693
   E-mail  steven.jones@acgov.org

2. Function or Event Information
   Does the agency have a ticket policy?  Yes [X]  No [ ]
   Face Value of Each Ticket/Pass $ 114.30
   Event Description  Not So Silent Night
   Date(s)  12 / 11 / 15
   Ticket(s)/Pass(es) provided by agency?  Yes [ ]  No [X]
   Name of Source  If no: Golden State Warriors
   Official's Name (Last, First)  If yes: 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)
      Identify one of the following:
      Ceremonial Role [ ]  Other [ ]  Income [ ]
      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 [ ]
      Ceremonial Role [ ]  Other [ ]  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 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  Steven Jones  Central District Director  12.22.2015
   Print Name  Title

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)
Steven Jones

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

2. Function or Event Information

<table>
<thead>
<tr>
<th>Does the agency have a ticket policy?</th>
<th>Yes ☒ No ☐</th>
</tr>
</thead>
<tbody>
<tr>
<td>Event Description</td>
<td>Football Game</td>
</tr>
<tr>
<td>Provide Title/Explanation</td>
<td></td>
</tr>
<tr>
<td>Ticket(s)/Pass(es) provided by agency?</td>
<td>Yes ☐ No ☒</td>
</tr>
<tr>
<td>Date(s)</td>
<td>12 / 24 / 15</td>
</tr>
<tr>
<td>If no:</td>
<td>Oakland Raiders</td>
</tr>
<tr>
<td>Name of Source</td>
<td></td>
</tr>
<tr>
<td>Was ticket distribution made at the behest of agency official?</td>
<td>No ☐ Yes ☒</td>
</tr>
<tr>
<td>If yes:</td>
<td>Alameda County Supervisor Wilma Chan</td>
</tr>
<tr>
<td>Official’s Name (Last, First)</td>
<td></td>
</tr>
</tbody>
</table>

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>Jackson, Meryl</td>
<td>2+1park</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>To promote attendance at an event held at a County facility in order to maximize potential County revenue from sales.</td>
</tr>
<tr>
<td></td>
<td>2+1park</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></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: Steven Jones
Print Name: Central District Director: 12.22.2015
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)**
Steven Jones

**Area Code/Phone Number**
(510) 272-6693

**E-mail**
steven.jones@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 [x]  
- **Event Description** Football Game
  - **Provide Title/Explanation**
- **Ticket(s)/Pass(es) provided by agency?** Yes [ ] No [x]  
  - **Name of Source**
  - **Face Value of Each Ticket/Pass $** $222 ticket/$35 parking
  - **Date(s)** 12 / 06 / 15

**If no:**

- **Oakland Raiders**

**If yes:**

- **Alameda County Supervisor Wilma Chan**

**Official’s Name (Last, First)**

**Date of Original Filing:**

(Month, Day, Year)

**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

<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

<table>
<thead>
<tr>
<th>Name of Individual</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Ceremonial Role [ ] Other [ ] Income [ ]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Camacho, Josie</td>
<td>2+1park</td>
<td>To promote attendance at an event held at a County facility in order to maximize potential County revenue from sales.</td>
</tr>
<tr>
<td></td>
<td>2+1park</td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
</tbody>
</table>

#### C. Name of Outside Organization

<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>
</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**

**Print Name**

**Title**

**Central District Director**

**Date**

(Month, Day, Year)

**Comment:**

FPPC Toll-Free Helpline: 888/ASK-FPPC (888/275-7772)
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)
Steven Jones

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

2. Function or Event Information
Does the agency have a ticket policy? Yes ☒ No ☐
Face Value of Each Ticket/Pass $ 222
Event Description Football Game
Provide Title/Explanation
Date(s) 12/24/15
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: Oakland Raiders
If yes: Alameda County Supervisor Wilma Chan
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>A.</th>
<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>
<td></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 ☐
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.
Ceremonial Role ☐ Other ☐ Income ☐
If checking "Ceremonial Role" or "Other" describe below:

| Cravalho, Brian | 2 |                                       |

<table>
<thead>
<tr>
<th>C.</th>
<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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</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
Steven Jones
Central District Director

Date of Signature 12.22.2015
(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: Warriors
- Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
- Face Value of Each Ticket/Pass $450
- Date(s): 11/9/15
- If no: Indian 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.

<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>Social Services Agency</td>
<td>4</td>
<td>To reward a County employee for their exemplary service to the public</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></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>
<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, 251, Oakland</td>
<td>4</td>
<td>To reward a nonprofit organization for its contributions to the community</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name (Last, First)</th>
<th>Date of Original Filing: (Month, Day, Year)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anna Gee</td>
<td></td>
</tr>
<tr>
<td>Operations Chief</td>
<td></td>
</tr>
<tr>
<td>12/1/15</td>
<td></td>
</tr>
</tbody>
</table>

**4. Verification**
- Anna Gee
- Operations Chief
- 12/1/15

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  Warriors
   Face Value of Each Ticket/Pass $ 450
   Date(s) 11 / 2 / 15  11 / 6 / 15
   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 (Last, First)  Number of Ticket(s)/Pass(es)  Identify one of the following:
   Ceremonial Role ☐  Other ☒  Income ☐
   Pete, Geoffrey  4
   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

   Aguillard, Eva  4

   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
   Oakland Community Organizations-7200 Bancroft Ave, #2-Oakland, 94605  4
   To reward a nonprofit organization for its contributions to the community
   COMMUNITY ENGAGEMENT

4. Verification
   8944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Anna Gee  Operations Chief  12/1/15
   Print Name  Title  (Month, Day, Year)
   Comment: Pete received 11/2 tix
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

A Public Document
Date Stamp California Form 802
For Official Use Only

2. Function or Event Information
Does the agency have a ticket policy? Yes ☒ No ☐
Event Description Basketball game
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 $ 600
Date(s) 11 / 24 / 15 12 / 16 / 15
If no: GSW
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>

<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>Wilkinson, Steve</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 County revenue from parking and concession sales</td>
</tr>
<tr>
<td>Mcdonald, Eileen</td>
<td>4</td>
<td>Ceremonial Role ☒ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></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>

<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>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>
<tr>
<td>Oakland 94605 SENIOR ADVOCACY</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.

Anna Gee Operations Chief
Print Name Title
12/22/15 (Month, Day, Year)

Comment: Macdonald received 12/16 tix.

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 (510) 272-6694
   E-mail anna.gee@acgov.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $ 500/350
   Event Description Basketball game
     Provide Title/Explanation
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   Date(s) 12 / 18 / 15 12 / 23 / 15
   If no: GSW
     Name of Source
     If yes: Miley, Nate
     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</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lowery, Wesley</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>Parker, Denise</td>
<td>2</td>
<td>Ceremonial Role ☐ Other ☒ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<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>
<tbody>
<tr>
<td>East Bay Innovations</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>
<tr>
<td>Oakland 94605 SENIOR ADVOCACY</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Verification
   8944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Anna Gee
   Print Name
   Operations Chief
   Title
   12/22/15
   (Month, Day, Year)

Comment: Lowery received 12/23 tix.
**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
- **Face Value of Each Ticket/Pass $** 650/350
- **Date(s)**: 12 / 25 / 15
- **Ticket(s)/Pass(es) provided by agency?** Yes ☐ No ✗
- **Was ticket distribution made at the behest of agency official?** No ☐ Yes ✗
- **If no:** GSW
- **If yes:** Miley, Nate

### 3. Recipients

#### A. Name of Agency, Department or Unit
- **Board of Supervisors, District 4 staff**
  - **Number of Ticket(s)/Pass(es)**: 2
  - **Describe the public purpose made pursuant to the agency's policy**: To reward a County employee for their exemplary service to the public
- **Social Services Agency**
  - **Number of Ticket(s)/Pass(es)**: 2
  - **Describe the public purpose made pursuant to the agency's policy**: To reward a County employee for their exemplary service to the public

#### B. Name of Individual (Last First)
- **Alexander, Toni**
  - **Number of Ticket(s)/Pass(es)**: 6
  - **Identify one of the following:** Ceremonial Role ☐ Other ✗ Income ☐
  - **Describe the public purpose made pursuant to the agency's policy**: To promote attendance at an event held at a County facility in order to maximize potential County revenue from parking and concession sales
- **Linton, Donna**
  - **Number of Ticket(s)/Pass(es)**: 2

#### C. Name of Outside Organization (include address and description)

### 4. Verification
- **Signature of Agency Head or Designee**: Anna Gee
- **First Name**: Operations Chief
- **Title**: (Month, Day, Year) 12/22/15
- **Comment**: Woody received 12/28 tix.

**FPPC Form 802 (4/12)**
**FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)**
### 3. Recipients

**A. Name of Agency, Department or Unit**  
<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>Board of Supervisors, District 4</td>
<td>1</td>
<td>To promote attendance at an event held at a County facility in order to maximize potential County revenue from parking and concession sales.</td>
</tr>
<tr>
<td>Board of Supervisors, District 2 staff</td>
<td>2</td>
<td></td>
</tr>
</tbody>
</table>

**B. Name of individual**  
<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>Dones, Alan</td>
<td>2</td>
<td>Ceremonial Role ☑ Other ✗ Income ☑</td>
</tr>
<tr>
<td>Dunlap, Kamika</td>
<td>2</td>
<td>Ceremonial Role ☑ Other ✗ Income ☑</td>
</tr>
<tr>
<td>Walker, Christina</td>
<td>1</td>
<td>Ceremonial Role ☑ Other ✗ Income ☑</td>
</tr>
<tr>
<td>Woody, Charles</td>
<td>4</td>
<td>Ceremonial Role ☑ Other ✗ Income ☑</td>
</tr>
</tbody>
</table>

**C. Name of Outside Organization**  
<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>
</table>

---

California Form 802  
A Public Document  
FPFDC Form 802 (4/12)  
FPFDC 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:** (510) 272-6694
- **E-mail:** anna.gee@acgov.org

### 2. Function or Event Information
- **Does the agency have a ticket policy?** Yes [x] No [c]
- **Face Value of Each Ticket/Pass:** $94.00
- **Event Description:** Pop NYE concert
- **Date(s):** 12 / 31 / 15
- **Ticket(s)/Pass(es) provided by agency?** Yes [c] No [x]
- **Name of Source:** GSW
- **Was ticket distribution made at the behest of agency official?** Yes [x] No [c]
- **Official’s Name (Last, First):** Miley, Nate

### 3. Recipients
- **A. Name of Agency, Department or Unit**
  - **County Administrator’s Office**
  - **Number of Ticket(s)/Pass(es):** 2
  - **Describe the public purpose made pursuant to the agency’s policy:** To promote attendance at an event held at a County facility in order to maximize potential County revenue from parking and concession sales.

- **B. Name of Individual**
  - **Baecker, Katy**
  - **Number of Ticket(s)/Pass(es):** 2
  - **Describe the public purpose made pursuant to the agency’s policy:** 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)**
  - **Describe the public purpose made pursuant to the agency’s policy**

---

12 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

- **Anna Gee**
  - **Operations Chief**
  - **Print Name**
  - **Title**
  - **Date:** 12/22/15 (Month, Day, Year)

**Comment:**

---

California Form 802
For Official Use Only

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: (510) 272-6694
E-mail: anna.gee@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: Basketball game
Date(s): 1 / 2 / 16, 1 / 4 / 16
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
If no: GSW
Name of Source: Miley, Nate
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>Sheriff’s Office</td>
<td>2</td>
<td>To reward a County employee for their exemplary service to the public</td>
</tr>
</tbody>
</table>

<table>
<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>Kim, Henry</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 parking and concession sales

<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>Love Temple Missionary Baptist Church 8401 Birch St, Oakland 94621</td>
<td>2</td>
<td>To reward a nonprofit organization for its contributions to the community</td>
</tr>
</tbody>
</table>

4. Verification

44.1 and 18842. I have verified that the distribution set forth above, is in accordance with the requirements.

Anna Gee
Operations Chief
Print Name Title
Date: 12/22/15 (Month, Day, Year)

Comment:
Love Temple received 1/4 tix.
## Agency Report of:
### Ceremonial Role Events and Ticket/Pass Distributions

**A Public Document**

### 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
- **Face Value of Each Ticket/Pass** $700/1,100
- **Ticket(s)/Pass(es) provided by agency?** Yes ☐ No ☒
- **Was ticket distribution made at the behest of agency official?** Yes ☒ No ☐

**Event Date(s)** 1/11/16 1/14/16
**Name of Source**
- GSW

**Official’s Name (Last, First)**
- Miley, Nate

### 3. Recipients

- **A. Name of Agency, Department or Unit**
  - Sheriff’s Office
  - Board of Supervisors, District 4 staff

<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>Sheriff’s Office</td>
<td>4</td>
<td>To reward a County employee for their exemplary service to the public</td>
</tr>
<tr>
<td>Board of Supervisors, District 4 staff</td>
<td>2</td>
<td>To reward a County employee for their exemplary service to the public</td>
</tr>
</tbody>
</table>

- **B. Name of Individual (Last Name)**
  - Le, Janice

<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>Le, Janice</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 parking and concession sales

- **C. Name of Outside Organization (include address and description)**

<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

8944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

**Anna Gee**
**Operations Chief**
**Date** 12/22/15

**Comment:** Sheriff’s office received 1/11 tix.
## 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

### 2. Function or Event Information
- Does the agency have a ticket policy? Yes [x] No [ ]
- Face Value of Each Ticket/Pass $________________________ 500/700
- Event Description Basketball Game
- Date(s) 1/22/16 1/27/16
- Ticket(s)/Pass(es) provided by agency? Yes [ ] No [x]
- If no: GSW
- 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>

<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></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>
<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>Castro Valley/Eden Area Chamber of Commerce-3467 Castro Valley Blvd,</td>
<td>4</td>
<td>To reward a nonprofit organization for their contributions to the community</td>
</tr>
<tr>
<td>Castro Valley 94546</td>
<td>P R O M O T I O N O F BUSINESSES</td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Anna Gee</th>
<th>Operations Chief</th>
</tr>
</thead>
<tbody>
<tr>
<td>Print Name</td>
<td>Title</td>
</tr>
<tr>
<td>__________</td>
<td>__________</td>
</tr>
<tr>
<td>12/22/15</td>
<td>(Month, Day, Year)</td>
</tr>
</tbody>
</table>

Comment: Chamber received 1/22 tix.
### Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions
Continuation Sheet

**Agency Name**
Alameda County

### 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>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<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 ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income ☐</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>Ceremonial Role ☐ Other ☐</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Income ☐</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>Ceremonial Role ☐ Other ☐</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Income ☐</td>
</tr>
</tbody>
</table>

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>League of Women Voters of the Eden Area-PO Box 2234, Castro Valley 94546</td>
<td>4</td>
<td>To reward a nonprofit organization for its contributions to the community</td>
</tr>
</tbody>
</table>

AWARENESS TO COMMUNITY ABOUT CURRENT LEGISLATIVE ISSUES
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 $700/600
   Date(s) 3 / 1 / 16 3 / 12 / 16
   If no: GSW 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>San Leandro Recreation and Human Services</td>
<td>2</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 Individual</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Johnson, Dee</td>
<td>4</td>
<td>Ceremonial Role ☐ Other ☑ Income ☐</td>
</tr>
<tr>
<td>Ceremonial Role ☐ Other ☐ Income ☐</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>
<td></td>
</tr>
</tbody>
</table>

4. Verification
   18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Anna Gee Operations Chief 12/22/15
   Comment: Johnson received 3/12 tix

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 □***
   - Face Value of Each Ticket/Pass $ **1,100**
   - Event Description: Basketball game
   - Date(s) 3 / 16 / 16
   - Ticket(s)/Pass(es) provided by agency? **Yes □ No □***
   - If no: **GSW**
   - 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**
<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**
<table>
<thead>
<tr>
<th>Name of Individual</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dunlap, Kamika</td>
<td>4</td>
<td>Ceremonial Role □ Other □</td>
<td>□</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
   - 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**
<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>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. **Verification**

   **I have verified that the distribution set forth above, is in accordance with the requirements.**

   Anna Gee
   - Print Name
   - Operations Chief
   - Title
   - 12/22/15

   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)
   Amy Shrago
   Area Code/Phone Number E-mail
   (510) 272-6695 amy.shrago@acgov.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☐ No ☒
   Event Description: Warriors vs. Suns
   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 $600.00
   Date(s): 12 / 16 / 15
   If no: Golden State Warriors
   Name of Source
   If yes: Carson, Keith
   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>

<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>Perez, Iliana</td>
<td>4</td>
<td>Other ☒ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>To promote attendance at a County facility in order to maximize potential County revenue from parking and concession sales</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>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:
   44.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Amy Shrago: Print Name
   Supervisor’s Assistant: Title
   12/18/15: (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

2. **Function or Event Information**
   - **Does the agency have a ticket policy?** Yes ☐ No ☒
   - **Event Description**
     - Warriors vs. Bucks
   - **Face Value of Each Ticket/Pass** $500.00
   - **Date(s)**: 12/18/15
   - **Ticket(s)/Pass(es) provided by agency?** Yes ☐ No ☒
   - **Was ticket distribution made at the behest of agency official?** No ☐ Yes ☒
   - **If yes:**
     - **Name of Source**: Golden State Warriors
     - **Official’s Name (Last, First)**: Carson, Keith

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)**: Wantatah, Nathan
   - **Number of Ticket(s)/Pass(es)**: 4
   - **Ceremonial Role** ☐ **Other** ☒
   - **Income** ☐
   - **To promote attendance 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**
   - 18944.1 and 18942. I have verified that the distribution set forth above is in accordance with the requirements.
   - **Amy Shrago**
   - **Supervisor’s Assistant**
   - **Print Name**
   - **Title**
   - **Date (Month, Day, Year)**: 12/18/15

---

**Comment:**

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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)
   Amy Shrago
   Area Code/Phone Number (510) 272-6695
   E-mail amy.shrago@acgov.org
   Date of Original Filing: ____________________________

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☐ No ☒
   Event Description Warriors vs. Jazz
   Face Value of Each Ticket/Pass $ ____________
   Date(s) 12 / 23 / 15 ____________
   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: Carson, Keith
   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>

<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>Platt, Larry</td>
<td>4</td>
<td>C.</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☒ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>To reward a community volunteer for his or her service to the public</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
   8944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

   Amy Shrago   Supervisor's Assistant   12/18/15
   Print Name   Title                    (Month, Day, Year)

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

1. **Agency Name**
   - Alameda County
   - Board of Supervisors
   - Designated Agency Contact (Name, Title)
     - Amy Shrago
     - Area Code/Phone Number: (510) 272-6695
     - E-mail: amy.shrago@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 vs. Kings
   - Date(s): 12/28/15
   - 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: Carson, Keith
   - 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 ☐
   - 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
   - Urban Habitat 1212 Broadway, Suite 500 Oakland, CA 94612 non-profit 2 To reward a school or nonprofit organization for its contributions to the community
   - Filipino Advocates for Justice 310 8th Street, Suite 308 Oakland CA 94607 non-profit 2 To reward a school or nonprofit organization for its contributions to the community

4. **Verification**
   - I have verified that the distribution set forth above, is in accordance with the requirements.
   - Signature of Agency Head or Designee
   - Amy Shrago
   - Supervisor's Assistant
   - Date: 12/18/15 (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
   Oakland Alameda County Coliseum Authority
   Nate Miley, Commissioner
   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 Warriors 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 $ __________
   Date(s) 11 / 24 / 15 __________ / __________
   If no: Name of Source Golden State Warriors
   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>
</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>Murrell, Virtual</td>
<td>4</td>
<td>Ceremonial Role ☒ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td>4</td>
<td>If checking “Ceremonial Role” or “Other” describe below:</td>
</tr>
<tr>
<td>To promote the Coliseum Complex for use by the general public and businesses to maximize revenues</td>
<td></td>
<td></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>
</table>

4. Verification
   44:1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Anna Gee Print Name
   Operations Chief Title
   12/1/15 (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 ☐
   Face Value of Each Ticket/Pass $ 600
   Event Description Warriors
   Provide Title/Explanation
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   Date(s) 11 / 24 / 15
   If no: Golden State Warrriors
   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**
   **Number of Ticket(s)/Pass(es)**
   **Describe the public purpose made pursuant to the agency's policy**

4. **Verification**
   18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Anna Gee 
   Operations Chief
   12/1/15
   (Month, Day, Year)

Comment:
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

   **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 $** 450/800
   - **Event Description** Warriors
   - **Date(s)**
     - 11 / 17 / 15
     - 11 / 20 / 15
   - **Ticket(s)/Pass(es) provided by agency?** Yes ☐ No ☒
   - **Was ticket distribution made at the behest of agency official?** Yes ☒ No ☐
   - **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**
     - BOS District 4-staff
     - Number: 2
     - To reward a County employee for their exemplary service to the public
     - BOS District 4 Supervisor
     - Number: 2
     - To promote attendance at an event held at a County facility in order to maximize potential County revenue from parking and sales

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

   **Dunlap, Kamika**
   - Number: 2

   **C. Name of Outside Organization**
   - **Number of Ticket(s)/Pass(es)**
   - **Describe the public purpose made pursuant to the agency’s policy**
     - United Seniors of Oakland & Alameda County
     - Number: 4
     - To reward a nonprofit organization for its contributions to the community

   **94605 SENIOR ADVOCACY**

4. **Verification**
   - 1944.1 and 1944.2. I have verified that the distribution set forth above, is in accordance with the requirements.
   - **Anna Gee**
   - **Operations Chief**
   - **12/1/15**
   - **Print Name**
   - **Title**
   - **(Month, Day, Year)**

   **Comment:**

---

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

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>Social Services Agency</td>
<td>2</td>
<td>To reward a County employee for their exemplary service to the public</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>Arun, Jonathan</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 County revenue from parking and concession sales.</td>
</tr>
<tr>
<td>Arun, Julie</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>Ceremonial Role ☐ Other ☐ Income ☐</td>
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<th>Name of Outside Organization (include address and description)</th>
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FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)