Tickets Provided by Agency Report

A Public Document

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

Date Stamp California Form 802
   (For Official Use Only)

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 1/23/2010
   Description of Event: Eddie Izard
   Face Value of Ticket: $79.00
   Agency Event: ☑ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 4
   Ticket(s) Provided to Agency: ☑ Pursuant to Contract

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

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scott Haggerty</td>
<td>4</td>
<td>To obtain oversight of facilities or events that have received county funding or support</td>
</tr>
</tbody>
</table>

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

   Name of Behesting Agency Official: Supervisor Scott Haggerty, District 1
   Name of Individual or Organization: ____________________________
   Number of Tickets: ______
   Description of Organization: _________________________________
   Address of Organization: 
   Number and Street: 
   City: 
   State: 
   Zip Code: _______________________
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

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

   Signature of Agency Head or Designee: ____________________________
   Print Name: CRYSTAL HISHIDA GRAFF
   Title: PRINCIPAL ANALYST
   (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
**Tickets Provided by Agency Report**

**1. Agency Name**
COUNTY OF ALAMEDA

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

**Street Address**
OAKLAND, CA 94612

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

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

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

**Date Stamp**

**California Form 802**
For Official Use Only

**□ Amendment** (Must explain in Part 5.)

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

---

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

**Date(s) of Event:** 1/16/2010

**Description of Event:** Harlem Globetrotters

**Face Value of Ticket:** $33.00

**Agency Event**

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

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

**Number of Tickets Received:** 4

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

---

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

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<tr>
<th>Name of Official (Last, First)</th>
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</thead>
<tbody>
<tr>
<td>Scott Haggerty</td>
<td>4</td>
<td>To obtain oversight of facilities or events that have received County funding or support</td>
</tr>
</tbody>
</table>

---

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

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

**Name of Individual or Organization:**

**Number of Tickets:**

**Description of Organization:**

**Address of Organization:**

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

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

---

**5. Verification**

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

[Signature]

**Signature of Agency Head or Designee**

**CRystal Hishida Graff**
**Principal Analyst**

[Date]

**Comment:** (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by Agency Report  
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Area Code/Phone Number (510) 272-3882  
E-mail crystal.hishida@acgov.org  
Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office  

2. Event For Which Tickets Were Distributed

Date(s) of Event: 12/11/09 Description of Event: Not So Silent Night

Face Value of Ticket: $62.50

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

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

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

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

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Haggerty, Scott Alameda County Supervisor</td>
<td>4</td>
<td>to review facilities and events that may require county funding or support in the near future.</td>
</tr>
<tr>
<td>District 1</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

Name of Behesting Agency Official: [Supervisor Scott Haggerty, District 1]

Name of Individual or Organization:                               Number of Tickets: __________

Description of Organization: ____________________________________________

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

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

5. Verification

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

[Signature of Agency Head or Designee]  
CRystal HISHIDA GRAFF  
PRINCIPAL ANALYST  
12/15/09 (Month, day, year)

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

### 1. Agency Name
COUNTY OF ALAMEDA

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

### Street Address
OAKLAND, CA 94612

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

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

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

### Amendment (Must explain in Part 5.)

### Date Stamp
California Form 802
For Official Use Only

## 2. Event For Which Tickets Were Distributed

**Date(s) of Event:** 12 / 11 / 09  
**Description of Event:** Not So Silent Night  
**Face Value of Ticket:** $122.50

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

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

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

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

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

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

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

**Name of Individual or Organization:** Neal Hickey

**Number of Tickets:** 2

**Description of Organization:**

**Address of Organization:**

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

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

**Volunteer contribution to community**

### 5. Verification

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

**Signature of Agency Head or Designee**

**Print Name**

**Title**

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

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

---

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

**A Public Document**

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

<table>
<thead>
<tr>
<th>Date Stamp</th>
<th>California Form 802</th>
<th>For Official Use Only</th>
</tr>
</thead>
</table>

2. **Event For Which Tickets Were Distributed**
   - Date(s) of Event: 02/25/10
   - Description of Event: Warriors game
   - Face Value of Ticket: $95.00
   - Agency Event
   - Yes
   - No (Identify source of tickets below.)
   - Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   - Number of Tickets Received: 4
   - Ticket(s) Provided to Agency
   - ☑ Pursuant to Contract

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

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

4. **Individual or Organization Receiving Ticket(s)**
   - (Provided at the behest of an agency official.)
   - Name of Behesting Agency Official: Alameda County Supervisor Scott Haggerty, District 1
   - Name of Individual or Organization: Dennis Fey
   - Number of Tickets: 4
   - Description of Organization:
   - Address of Organization:
     - Number and Street
     - City
     - State
     - Zip Code
   - Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   - Reward individual for contributions to the community

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

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

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

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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 01/27/10 02/10/10
   Description of Event: Warriors game
   Face Value of Ticket: $95.00
   Agency Event □ Yes □ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 8
   Ticket(s) Provided to Agency: □ GRATUITOUSLY □ PURSUANT TO CONTRACT

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

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

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: Scott Haggerty, Alameda County Supervisor, District 1
   Name of Individual or Organization: Dennis Fey
   Number of Tickets: 8
   Description of Organization:
   Address of Organization: [H] [O]
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   Reward for individual for contributions to the community.

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.
   [Signature]
   CRYSTAL HISHIDA GRAFF
   PRINCIPAL ANALYST
   [Print Name]
   [Title]
   1/14/09
   (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
1. Agency Name
   COUNTY OF ALAMEDA
   1221 OAK STREET, #555
   OAKLAND, CA. 94612
   Area Code/Phone Number: (510) 272-3882
   E-mail: crystal.hishida@acgov.org
   Agency Contact: Crystal Hishida Graff, Principal Analyst, County Administrator's Office

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 12/11/09
   Description of Event: Live 105's Not So Silent Night
   Face Value of Ticket: $62.50
   Agency Event: No
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 2
   Ticket(s) Provided to Agency: Yes

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

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

4. Individual or Organization Receiving Ticket(s)
   Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District
   Name of Individual or Organization: Katie DeCarlo
   Number of Tickets: 2
   Description of Organization:
   Address of Organization: Oakland, CA 94610
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   To reward a community volunteer for his or her service to the public.

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

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

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   Date Stamp

   California Form 802
   For Official Use Only

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

2. Event For Which Tickets Were Distributed

   Date(s) of Event: 01/15/10
   Description of Event: Basketball Game
   Face Value of Ticket: $95

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

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

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

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

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

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

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

   Number of Tickets: 4

   Description of Organization:
   Promotes good and transparent government operations

   Address of Organization:
   PO Box 2234, Castro Valley, CA 94546

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

5. Verification

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

   Signature of Agency Head or Designee
   CRYSTAL HISHIDA GRAFF
   PRINCIPAL ANALYST
   12/17/09 (month, day, year)

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

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   COUNTY OF ALAMEDA
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   Area Code/Phone Number
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   E-mail
   crystal.hishida@acgov.org
   Agency Contact (name and title)
   Crystal Hishida Graff, Principal Analyst, County Administrator's Office

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 01/15/10
   Description of Event: Basketball Game
   Face Value of Ticket: $95
   Agency Event
   Yes □ No X (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 4
   Ticket(s) Provided to Agency: □ Gratuitously X Pursuant to Contract

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

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

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4
   Name of Individual or Organization: Marc Pena
   Number of Tickets: 4

   Description of Organization:

   Address of Organization:
   Number and Street
   City
   State
   Zip Code

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

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

   [Signature of Agency Head or Designee] CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST
   Print Name
   Title
   Date (Month, Day, Year)

   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
   Volunteer contribution to community
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E-mail
crystal.hishida@acgov.org
Agency Contact (name and title)
Crystal Hishida Graff, Principal Analyst, County Administrator's Office
Date of Original Filing: (month, day, year)

2. Event For Which Tickets Were Distributed
Date(s) of Event: 01/08/10
Description of Event: Basketball Game
Face Value of Ticket: $75
Agency Event
☐ Yes
☒ No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
Number of Tickets Received: 2
Ticket(s) Provided to Agency: ☒ Gratuitously
☐ Pursuant to Contract

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

<table>
<thead>
<tr>
<th>Name of Official</th>
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<td></td>
</tr>
</tbody>
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4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4
Name of Individual or Organization: Chris Cameron
Number of Tickets: 2
Description of Organization:
Address of Organization:
Number and Street
City
State
Zip Code
Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
volunteer contribution to community

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

[Signature of Agency Head or Designee]
CRystal HISHIDA GRAFF
PRINCIPAL ANALYST
Comment: (Use this space or an attachment for any additional information including amendment explanation.)
volunteer contribution to community

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

2. Event For Which Tickets Were Distributed
Date(s) of Event: 01/08/10
Description of Event: Basketball Game
Face Value of Ticket: $95

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

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

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

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

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

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: David Haubert
Number of Tickets: 2

Description of Organization:

Address of Organization:

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

volunteer contribution to community

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

Signature of Agency Official or Designee CRISTAL HISHIDA GRAFF PRINCIPAL ANALYST

Date (Month, Day, Year) 12/31/09

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

volunteer contribution to community
Tickets Provided by
Agency Report
A Public Document

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Date Stamp California Form 802

For Official Use Only

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

2. Event For Which Tickets Were Distributed
Date(s) of Event: 01 / 08 / 10 Description of Event: Basketball Game
Face Value of Ticket: $ 75
Agency Event ☐ Yes ☒ No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
Number of Tickets Received: 2 Ticket(s) Provided to Agency: ☐ Gratuitously ☒ Pursuant to Contract

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

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

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4
Name of Individual or Organization: Harold Lowe
Number of Tickets: 2
Description of Organization: ___________________________________________
Address of Organization: _______________________________________________
City State Zip Code
Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
volunteer contribution to community

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

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

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

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

A Public Document

1. Agency Name
   COUNTY OF ALAMEDA
   Division, Department, or Region (if applicable)
   1221 OAK STREET, #555

Street Address
   OAKLAND, CA 94612

Area Code/Phone Number
   (510) 272-3882

E-mail
   crystal.hishida@acgov.org

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

Date Stamp

California Form 802
For Official Use Only

□ Amendment. (Must explain in Part 5.)

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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 01 / 08 / 10
   Description of Event: Basketball Game
   Face Value of Ticket: $15

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

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

Number of Tickets Received: 2

Ticket(s) Provided to Agency: □ Gratuitously  □ Pursuant to Contract

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

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

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

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

Name of Individual or Organization: Linda Tangren

Number of Tickets: 2

Address of Organization:

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

volunteer contribution to community

5. Verification

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

Signature of Agency Head or Designee

Crystal Hishida Graff  Principal Analyst

Print Name  Title

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

volunteer contribution to community

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

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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 12/03/09
   Description of Event: Golden State Warriors Game
   Face Value of Ticket: $95.00
   Agency Event: No
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 4

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)
<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Briones, Ruben</td>
<td>4</td>
<td>To promote attendance at an event in a County facility</td>
</tr>
</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: Supervisor Alice Logue, District 5
   Name of Individual or Organization:
   Description of Organization:
   Address of Organization:
   Number and Street
   City
   State
   Zip Code
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.
   CRYSTAL HISHIDA GRAFF  PRINCIPAL ANALYST
   Signature of Agency Head or Designee  Print Name  Title
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
   To promote attendance at an event held at a County facility in order to maximize County revenue from concession sales

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

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

### 2. Event For Which Tickets Were Distributed
- **Date(s) of Event:** 02 / 10 / 10
- **Description of Event:** Warriors Basketball
- **Face Value of Ticket:** $95.00

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

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

### 4. Individual or Organization Receiving Ticket(s)
- **Name of Behesting Agency Official:** Alameda County Supervisor Scott Haggerty, District 1
- **Name of Individual or Organization:** City of Fremont Aging and Family Services
- **Number of Tickets:** 4

<table>
<thead>
<tr>
<th>Name of Individual or Organization</th>
<th>Number of Tickets</th>
<th>Description of Organization</th>
<th>Address of Organization</th>
</tr>
</thead>
<tbody>
<tr>
<td>City of Fremont Aging and Family Services</td>
<td>4</td>
<td>City's care for the elderly</td>
<td>3300 Capitol Ave, Fremont CA 94538</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Purpose for Distribution:</th>
<th>(Describe the public purpose for the distribution to the organization.)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>To raise funds to support the elderly in Fremont</td>
</tr>
</tbody>
</table>

### 5. Verification

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

**Signature:** CRYSTAL HISHIDA GRAFF
**Print Name:** PRINCIPAL ANALYST
**Title:**

**Date:** 12/17/07

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

---

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

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

Area Code/Phone Number
   (510) 272-3882

E-mail
   crystal.hishida@acgov.org

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

Date of Original Filing: 12/14/09

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 12/18/09
   Description of Event: Golden State Warriors Game
   Face Value of Ticket: $95.00

   Agency Event
   ☑ Yes  ☐ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 8
   Ticket(s) Provided to Agency: ☑ Gratuitously  ☐ Pursuant to Contract

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

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

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: Supervisor Alice Lai-Bitker, District 3
   Name of Individual or Organization: Mei-Ling Bitker
   Number of Tickets: 8
   Description of Organization:
   Address of Organization:
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   To promote attendance at an event held at a County facility in order to maximize County revenue from concession sales

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

   Signature of Agency official or designee
   CRYSTAL HISHIDA GRAFF  PRINCIPAL ANALYST
   Print Name
   Title
   Date (month, day/year)

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

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (888/275-3772)
Tickets Provided by Agency Report

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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 12/26/09
   Description of Event: Golden State Warriors vs. Phoenix Suns
   Face Value of Ticket: $95.00
   Agency Event □ Yes □ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 2
   Ticket(s) Provided to Agency: □ Gratuitously □ Pursuant to Contract

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

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

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

   Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District
   Name of Individual or Organization: Marlene Hurd
   Number of Tickets: 2
   Description of Organization:
   Address of Organization:
   Number and Street
   City
   State
   Zip Code
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   To reward a community volunteer for his or her service to the public.

5. Verification

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

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

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

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

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

## 2. Event For Which Tickets Were Distributed

**Date(s) of Event:** 12/26/09  
**Description of Event:** Golden State Warriors vs. Phoenix Suns  
**Face Value of Ticket:** $95.00

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

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

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

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

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carson, Keith</td>
<td>8</td>
<td>To obtain oversight of County facilities.</td>
</tr>
</tbody>
</table>

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

**Name of Behesting Agency Official:** Supervisor Keith Carson, District 5

**Name of Individual or Organization:**  
**Number of Tickets:**

**Description of Organization:**

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

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

## 5. Verification

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

**Signature of Agency Head or Designee:**  
**Print Name:** CRYSTAL HISHIDA GRAFF  
**Title:** PRINCIPAL ANALYST  
**Date:** 1/17/09 (month, day, year)

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

1. Agency Name
COUNTY OF ALAMEDA

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

Street Address
OAKLAND, CA 94612

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

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

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

2. Event For Which Tickets Were Distributed

Date(s) of Event: 12 / 26 / 09
Description of Event: Golden State Warriors vs. Phoenix Suns

Face Value of Ticket: $95.00

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

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

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

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

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

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

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

Name of Individual or Organization: Ellen Parkinson
Number of Tickets: 2

Description of Organization:

Address of Organization:
Number and Street
City
State Zip Code

Purpose for Distribution: To reward a community volunteer for his or her service to the public.

5. Verification

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

Signature of Agency Head or Designee

CRYSTAL HISHIDA GRAFF
Print Name
PRINCIPAL ANALYST
Title

(month, day, year)

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

**Agency Name**
COUNTY OF ALAMEDA

**Division, Department, or Region**
1221 OAK STREET, #555

**Street Address**
OAKLAND, CA 94612

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

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

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

---

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

- **Date(s) of Event:** 01 / 03 / 10
- **Description of Event:** Raiders Game
- **Face Value of Ticket:** $150

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

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

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

---

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

- **Name of Official:** Haggerty, Scott
- **Number of Tickets:** 4
- **State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution:** to review facilities or events that may require County fund

---

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

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

- **Name of Individual or Organization:**
- **Number of Tickets:**

**Description of Organization:**

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

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

---

**5. Verification**

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

**Signature of Agency Head or Designee**

**Print Name**
CRYSTAL HISHIDA GRAFF

**Title**
PRINCIPAL ANALYST

**Date (mm/dd/yyyy):** 02/07/09

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

1. **Agency Name**
   
   COUNTY OF ALAMEDA

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

   **Street Address**
   
   OAKLAND, CA 94612

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

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

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

   **Date Stamp**
   
   California Form 802

   **For Official Use Only**

   **Amendment** *(Must explain in Part 5)*

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

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

   **Date(s) of Event:** 12 / 11 / 09

   **Description of Event:** Not so Silent Night

   **Face Value of Ticket:** $62.50

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

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

   **Number of Tickets Received:** 4

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

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

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

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

   **Name of Behesting Agency Official:** Nate Miley

   **Supervisor**  
   **District 4**

   **Name of Individual or Organization:** Christopher Miley

   **Number of Tickets:** 2

   **Description of Organization:**

   **Address of Organization:**

   Number and Street

   City

   State

   Zip Code

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

   Volunteer contribution to community

5. **Verification**

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

   **Signature of Agency Head or Designee**

   **CRystal Hishida Graff**

   **PRINCIPAL ANALYST**

   **12/11/09**

   *(Month, day, year)*

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

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

   FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
## Tickets Provided by Agency Report

### 1. Agency Name
COUNTY OF ALAMEDA

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

1221 OAK STREET, #555

**Street Address**
OAKLAND, CA 94612

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

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

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

**Date Stamp**

**California Form 802**
For Official Use Only

### 2. Event For Which Tickets Were Distributed

**Date(s) of Event:** 01/03/10

**Description of Event:** Raiders v. Baltimore Ravens

**Face Value of Ticket:** $150

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

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

**Number of Tickets Received:** 4

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

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

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

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

**Name of Behesting Agency Official:** Supervisor Gail Steele

**Name of Individual or Organization:** Save Our Sunol

**Number of Tickets:** 4

**Description of Organization:** preserves integrity and uniqueness of Sunol and protects quiet lifestyle and environment.

**Address of Organization:**
P.O. Box 69, Sunol, CA 94586

### 5. Verification

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

**Signature of Agency Head or Designee:**

**Print Name:** CRYSTAL HISHIDA GRAFF

**Title:** PRINCIPAL ANALYST

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

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

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

A Public Document

1. Agency Name  
   COUNTY OF ALAMEDA  
   Division, Department, or Region (if applicable)  
   1221 OAK STREET, #555

   Street Address  
   OAKLAND, CA. 94612

   Area Code/Phone Number  
   (510) 272-3882

   E-mail  
   crystal.hishida@acgov.org

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

   Date Stamp  
   California Form 802  
   For Official Use Only

   □ Amendment (Must explain in Part 5.)

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

2. Event For Which Tickets Were Distributed

   Date(s) of Event: 1/3/10  
   Description of Event: Raiders game

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

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

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

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

   Name of Official (Last, First)  
   Darryl Stewart

   Number of Tickets  
   3

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

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

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

   Name of Individual or Organization: 

   Number of Tickets: 

   Description of Organization: 

   Address of Organization: 
   Number and Street  
   City  
   State  
   Zip Code

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

5. Verification

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

   Signature of Agency Head or Designee  
   CRYSTAL HISHIDA GRAFF  
   PRINCIPAL ANALYST

   Print Name  
   Title

   (month, day, year)

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

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

### 1. Agency Name
- COUNTY OF ALAMEDA

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

**Street Address**
- OAKLAND, CA, 94612

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

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

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

### 2. Event For Which Tickets Were Distributed
- **Date(s) of Event:** 12 / 26 / 09
- **Description of Event:** Golden State Warriors vs. Phoenix Suns
- **Face Value of Ticket:** $95.00

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

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

**Number of Tickets Received:** 4

**Ticket(s) Provided to Agency:** ☑ Pursuant to Contract

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

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

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

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

**Name of Individual or Organization:** Playworks

**Number of Tickets:** 4

**Number of Tickets:**

**Description of Organization:** Improve the health & well-being of children by increasing opportunities for physical activity.

**Address of Organization:**
- 517 Fourth St., Oakland, CA 95607

**City:**
- Oakland

**State:**
- CA

**Zip Code:**
- 95607

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

### 5. Verification

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

**Signature of Agency Head or Designee:**
- CRYSTAL HISHIDA GRAFF

**Print Name:**
- Principal Analyst

**Title:**
- (month, day, year)

**Comment:** (Use this space or an attachment for any additional information including amendment explanation.)
1. Agency Name  
COUNTY OF ALAMEDA  
1221 OAK STREET, #555  
OAKLAND, CA, 94612  
Area Code/Phone Number: (510) 272-3882  
E-mail: crystal.hishida@acgov.org  
Agency Contact: Crystal Hishida Graff, Principal Analyst, County Administrator’s Office

2. Event For Which Tickets Were Distributed  
Date(s) of Event: 12/26/09  
Description of Event: Golden State Warriors vs. Phoenix Suns  
Face Value of Ticket: $95.00  
Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
Number of Tickets Received: 4  
Ticket(s) Provided to Agency: Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)  
Name of Official (Last, First)  
Number of Tickets  
Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)  
Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District  
Name of Individual or Organization: Urban Services YMCA  
Number of Tickets: 4  
Address of Organization: 3265 Market St.  
Oakland, CA 94608  
Number and Street  
City  
State  
Zip Code  
Purpose for Distribution: To reward a school or nonprofit organization for its contributions to the community.

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

Signature of Agency Head or Designee  
Crystal Hishida Graff  
Principal Analyst  
Print Name  
Title  
(month, day, year)
Tickets Provided by
Agency Report

A Public Document

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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 01 / 13 / 10 Description of Event: Golden State Warriors vs. Miami Heat
   Face Value of Ticket: $95.00

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

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

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

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District
   Name of Individual or Organization: Christiana Milton
   Number of Tickets: 4
   Description of Organization: ____________________________
   Address of Organization:
   Number and Street
   City
   State
   Zip Code
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   To reward a community volunteer for his or her service to the public.

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

   Signature of Agency Head or Designee: ____________________________
   Print Name: CRYSTAL HISHIDA GRAFF
   Title: PRINCIPAL ANALYST
   Date: 12/01/09

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

A Public Document

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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 01/16/10
   Description of Event: Harlem Globetrotters
   Face Value of Ticket: $33.00

   Agency Event: No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 2
   Ticket(s) Provided to Agency: Pursuant to Contract

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

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

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

   Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District
   Name of Individual or Organization: Henry Moore
   Number of Tickets: 2

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

   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   To promote attendance at a County facility in order to maximize potential County revenue from parking and concession

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

   Signature of Agency Head or Designee
   CRYSTAL HISHIDA GRAFF
   Print Name
   PRINCIPAL ANALYST
   Title
   Date of Original Filing: 02/09/09

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

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

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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 01/16/10
   Description of Event: Harlem Globetrotters
   Face Value of Ticket: $33.00
   Agency Event Yes No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 2
   Ticket(s) Provided to Agency: √ Pursuant to Contract

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

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

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

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

Name of Individual or Organization: Ne'Cole Moore-Clark
Number of Tickets: 2
Description of Organization:
Address of Organization:
Number and Street
City
State
Zip Code
Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
To promote attendance at a County facility in order to maximize potential County revenue from parking and concession

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

Signature of Agency Head or Designee

CRYSTAL HISHIDA GRAFF
Print Name

PRINCIPAL ANALYST
Title

(month, day, year)

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

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

A Public Document

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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 01 / 23 / 10
   Description of Event: Eddie Izzard
   Face Value of Ticket: $ 79.00
   Agency Event
   Yes ☐ No ☑ (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 1
   Ticket(s) Provided to Agency:
   ☐ Gratuitously ☑ Pursuant to Contract

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

   Name of Official
   (Last, First)
   DeReyes, Amy
   Number of Tickets
   1
   State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
   Reward for exemplary service to the public

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

   Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District
   Name of Individual or Organization:
   Number of Tickets: 1
   Description of Organization:
   Address of Organization:
   Number and Street
   City
   State
   Zip Code
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

5. Verification

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

Signature of Agency Head or Designee

Crystal Hishida Graff
PRINCIPAL ANALYST

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
1. Agency Name
   COUNTY OF ALAMEDA
   Division, Department, or Region (if applicable)
   1221 OAK STREET, #555
   Street Address
   OAKLAND, CA 94612
   Area Code/Phone Number (510) 272-3882
   E-mail crystal.hishida@acgov.org
   Agency Contact Crystal Hishida Graff, Principal Analyst, County Administrator's Office

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 01/23/10
   Description of Event: Eddie Izzard
   Face Value of Ticket: $79.00
   Agency Event Yes
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 1
   Ticket(s) Provided to Agency: Yes (Identify source of tickets below.)

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

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

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District
   Name of Individual or Organization: Ethan Shrager
   Number of Tickets: 1
   Description of Organization:
   Address of Organization:
   Purpose for Distribution: To promote attendance at a County facility in order to maximize potential County revenue from parking and concession

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.
   Signature of Agency Head or Designee
   Print Name CRYSTAL HISHIDA GRAFF
   Title PRINCIPAL ANALYST
   (Month, day, year) 12/30/09
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
1. Agency Name
COUNTY OF ALAMEDA

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

Street Address
OAKLAND, CA 94612

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

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

2. Event For Which Tickets Were Distributed
Date(s) of Event: 01/23/10
Description of Event: Eddie Izzard
Face Value of Ticket: $79.00

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

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

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

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

<table>
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<tr>
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</table>

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

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

Name of Individual or Organization: Marcia & Gary Shrago
Number of Tickets: 2

Description of Organization:

Address of Organization:
Number and Street
City
State
Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
To promote attendance at a County facility in order to maximize potential County revenue from parking and concession

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

Signature of Agency Head or Designee
CRystal Hishida Graff
Print Name
PRINCIPAL ANALYST
Title
12/30/09 (month, day, year)

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

## 1. Agency Name

**COUNTY OF ALAMEDA**

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

Street Address

1221 OAK STREET, #555, OAKLAND, CA 94612

**Area Code/Phone Number**

(510) 272-3882

crystal.hishida@acgov.org

**Agency Contact (name and title)**

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

## 2. Event For Which Tickets Were Distributed

**Date(s) of Event:** 12/28/09

**Description of Event:** Golden State Warriors Game

**Face Value of Ticket:** $95.00

**Agency Event**

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

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

**Number of Tickets Received:** 4

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

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

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

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

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

**Name of Individual or Organization:** City of Alameda Democratic Club

**Number of Tickets:** 4

**Description of Organization:** Grassroots organization working together to find common ground to be the most effective

**Address of Organization:** PO Box 2723, Alameda, CA 94501

**Number and Street:**

**City:**

**State:**

**Zip Code:**

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

To reward a school or non-profit organization for its contributions to the community

## 5. Verification

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

**Signature of Agency Head/Designee**

CRYSTAL HISHIDA GRAFF  PRINCIPAL ANALYST

**Print Name**  **Title**

12/21/09

**(month, day, year)**

FPPC Form 802 (Feb/09)

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

2. **Event For Which Tickets Were Distributed**
   - **Date(s) of Event:** 12/03/09
   - **Description of Event:** Golden State Warriors Game
   - **Face Value of Ticket:** $95.00

3. **Agency Official(s) Receiving Ticket(s)**
   - **Name of Official:**
     - (Last, First)
     - [Name]
   - **Number of Tickets:**
   - **State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution**

4. **Individual or Organization Receiving Ticket(s)**
   - **Name of Behesting Agency Official:** Supervisor Alice Lai-Bikter, District 3
   - **Name of Individual or Organization:** Helen Ma
   - **Number of Tickets:** 4

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

   **Signature of Agency Head/Designee**
   **Print Name**
   **Title**

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

   To promote attendance at an event held at a County facility in order to maximize County revenue from concession sales.
1. **Agency Name**
   COUNTY OF ALAMEDA

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

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

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

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

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

2. **Event For Which Tickets Were Distributed**
   **Date(s) of Event:** 12 / 03 / 09
   **Description of Event:** Golden State Warriors Game
   **Face Value of Ticket:** $ 95.00

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

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

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

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

<table>
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<tr>
<th>Name of Official</th>
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4. **Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)**

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

   **Name of Individual or Organization:** Naomi Tyler

   **Number of Tickets:** 4

   **Description of Organization:**
   __________________________________________________________

   **Address of Organization:**
   __________________________________________________________

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

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

   **Signature of Agency Head or Designee**
   CRYSTAL HISHIDA GRAFF

   **Print Name**
   PRINCIPAL ANALYST

   **Title**
   (month, day, year)

   **Comment:** (Use this space or an attachment for any additional information including amendment explanation.)
   To promote attendance at an event held at a County facility in order to maximize County revenue from concession sales
Tickets Provided by Agency Report

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

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

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

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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 12 / 11 / 09
   Description of Event: Live 105's Not So Silent Night
   __/__/____ Face Value of Ticket: $ 62.50

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

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

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

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

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

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

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

   Name of Individual or Organization: Miguel Briones
   Number of Tickets: 2

   Description of Organization:

   Address of Organization:
   Number and Street City State Zip Code

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

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

   Signature of Agency Head or Designee
   CRYSTAL HISHIDA GRAFF
   Print Name
   PRINCIPAL ANALYST
   Title
   12/02/09
   (month, day, year)

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

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

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

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

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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 12 / 11 / 09
   Description of Event: Live 105's Not So Silent Night
   Face Value of Ticket: $ 62.50

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

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

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

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

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

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

   Name of Individual or Organization: Daniela Myovich
   Number of Tickets: 2

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

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

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

   [Signature]
   CRYSTAL HISHIDA GRAFF
   PRINCIPAL ANALYST

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

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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 12/03/09
   Description of Event: Golden State Warriors Game
   Face Value of Ticket: $95.00
   Agency Event: No
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 5
   Ticket(s) Provided to Agency: Pursuant to Contract

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

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: Supervisor Alice Lai-Bitker, District 3
   Name of Individual or Organization: Alana Rayford
   Number of Tickets: 5
   Description of Organization:
   Address of Organization:
   Number and Street
   City
   State
   Zip Code
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.) To promote attendance at an event held at a County facility in order to maximize County revenue from concession sales

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.
   Signature of Agency Head or Designee: Crystal Hishida Graff
   Print Name: Crystal Hishida Graff
   Title: Principal Analyst
   Date: 12/03/09

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

2. Event For Which Tickets Were Distributed
Date(s) of Event: 1/13/10
Description of Event: Golden State Warriors vs. Miami Heat
Face Value of Ticket: $95.00
Agency Event: ☑ Yes ☐ No
Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
Number of Tickets Received: 2
Ticket(s) Provided to Agency: ☑ Gratuitously ☑ Pursuant to Contract

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

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

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District
Name of Individual or Organization: Lynn Sherell
Number of Tickets: 2

Descriptive of Organization: __________________________
Address of Organization: __________________________
Number and Street __________________________
City __________________________
State __________________________
Zip Code __________________________
Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
To reward a community volunteer for his or her service to the public.

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

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

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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 01 / 13 / 10
   Description of Event: Golden State Warriors vs. Miami Heat
   Face Value of Ticket: $ 95.00
   Agency Event:
   Yes  No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors
   Number of Tickets Received: 2
   Ticket(s) Provided to Agency:
   Gratuitously  Pursuant to Contract

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

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

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District
   Name of Individual or Organization: Hale Zukas
   Number of Tickets:
   Description of Organization:
   Address of Organization:
   Number and Street
   City
   State
   Zip Code
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   To reward a community volunteer for his or her service to the public.

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

   Signature of Agency Head or Designee
   CRYSTAL HISHIDA GRAFF
   Print Name
   PRINCIPAL ANALYST
   Title
   (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by
Agency Report

1. Agency Name
   COUNTY OF ALAMEDA
   Division, Department, or Region (if applicable)
   1221 OAK STREET, #555

Street Address
   OAKLAND, CA 94612

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

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

☐ Amendment (Must explain in Part 5.)

Date of Original Filing: __/__/____

2. Event For Which Tickets Were Distributed

Date(s) of Event: 01 / 03 / 10

Description of Event: Oakland Raiders vs. Baltimore Ravens

Face Value of Ticket: $ 150.00

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

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

Number of Tickets Received: 1

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

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

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

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

Name of Behesting Agency Official: Keith Carson, Supervisor District 5

Name of Individual or Organization: Mateo Reyes

Number of Tickets: 1

Description of Organization:

Address of Organization:

Number and Street

City

State

Zip Code

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

To reward a County employee for his exemplary service to the public.

5. Verification

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

Crystal Hishida Graff, Principal Analyst

Signature of Agency Head or Designee

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

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

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

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

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

**2. Event For Which Tickets Were Distributed**
- **Date(s) of Event:** 01/03/10
- **Description of Event:** Oakland Raiders vs. Baltimore Ravens
- **Face Value of Ticket:** $150.00

**Agency Event**
- Yes

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

**Number of Tickets Received:** 1

**Ticket(s) Provided to Agency:**
- Yes
- No (Identify source of tickets below.)

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

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

**4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)**
- **Name of Behesting Agency Official:** Keith Carson, Supervisor Fifth District
- **Name of Individual or Organization:** Nathan Reyes
- **Number of Tickets:** 1

**Description of Organization:**

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

**Purpose for Distribution:** (Describe the public purpose for the distribution to the organization.)
- To reward a community volunteer for his or her service to the public.

**5. Verification**

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

**Signature of Agency Head or Designee**

**Print Name**

**Title**

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

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FPPC Form 802 (Feb/03)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)