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

A Public Document

Agency	y Name				Date Stamp	California 802	
	ameda County					1 Onn	
Division, Department, or Region (<i>if Applicable</i>) Board of Supervisors						For Official Use Only	
Designated Agency Contact (Name, Title)							
Heather	Cartwright				Amendment (Must provide explanation in Part 3.)		
	de/Phone Number	E-mail					
(510) 27	72-6693	heather.cart	wright@acgo	v.org	Date of Original Filing:		
Function or Event Information						\$100	
	e agency have a ticke			of Each Ticket/Pass \$.	······································		
Event De	escription Baseball g	ame Provide Title/Expl		Date(s)0	7 , 01 , 21	//	
L VOIR D		Provide Title/Expl	anation				
Ticket(s)	/Pass(es) provided by	y agency?	Yes 🗌 No [If no: Oakla	nd A's Name of S	Source	
	et distribution made a acy official?	at the behest	No 🗌 Yes 🛛	If yes: Char	han, Wilma Official's Name (Last, First)		
Recipi	 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 						
	Number of						
A. N	ame of Agency, Departme	ent or Unit	Ticket(s)/ Pass(es)	Describe the pu	public purpose made pursuant to the agency's policy		
В.	Name of Individu (Lest, Firsti	al	Number of Ticket(s)/ Pase(cs)		Identify one of the follo	owing:	
	(Lest, Fuzti	al		Ceremonial Role	Other	Income	
B. Savas,	(Lest, Fuzti	al	Ticket(s)/	If checking "Ceremo To promote attend	Other Other Other belo	Income w: t held at a County facility in	
	(Lest, Fuzti	al	Ticket(s)/ Pass(es)	If checking "Ceremo To promote attend order to maximize	D Other D Danial Role" or "Other" describe belo Dance at a(n) event	Income w: t held at a County facility in	
	(Lest, Fuzti	al	Ticket(s)/ Pass(es)	If checking *Ceremo To promote attend order to maximize Ceremonial Role	D Other D Dinial Role" or "Other" describe belo dance at a(n) event potential County rev	Income w: t held at a County facility in enue Income	
	(Lest, Fuzti	nization	Ticket(s)/ Pass(es) 6 Number of Ticket(s)/	If checking "Ceremo To promote attend order to maximize Ceremonial Role if checking "Ceremo	Deter	Income	
Savas,	(Lest, Fireti Jared Name of Outside Orga	nization	Ticket(s)/ Pass(es) 6 Number of	If checking "Ceremo To promote attend order to maximize Ceremonial Role if checking "Ceremo	Other	Income	
Savas,	(Lest, Fireti Jared Name of Outside Orga (include address and de	nization escription)	Ticket(s)/ Pass(es) 6 Number of Ticket(s)/ Pass(es)	If checking "Cerema To promote attend order to maximize Ceremonial Role if checking "Cerema Describe the pu	Cher Cher Cher Contait Role" or "Other" describe below Cher Contait County rev Contait County rev Cother C	Income	
Savas,	(Lest, Fireti Jared Name of Outside Orga	nization escription)	Ticket(s)/ Pass(es) 6 Number of Ticket(s)/ Pass(es)	If checking "Cerema To promote attend order to maximize Ceremonial Role if checking "Cerema Describe the pu	Conter C	Income	
Savas,	(Lest, Fireti Jared Name of Outside Orga (include address and de	nization escription)	Ticket(s)/ Pass(es) 6 Number of Ticket(s)/ Pass(es)	If checking "Cerema To promote attend order to maximize Ceremonial Role if checking "Cerema Describe the pu	Cher Cher Cher Contait Role" or "Other" describe below Cher Contait County rev Contait County rev Cother C	Income	

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Alameda Coun						Tenn	
Division, Department, or Region (If Applicable) Board of Supervisors						For Official Use Only	
Designated Agency Contact (Name Title)							
Heather Cartwright					Amendment (Must	Amendment (Must provide explanation in Part 3.)	
Area Code/Phone Number E-mail					_		
(510) 272-6693	3	heather.car	twright@acgo	ov.org	Date of Original Filing:(Month, Day, Year)		
Function or I	Event Infor	mation		\$100			
					of Each Ticket/Pass \$.		
				7 , 02 , 21	//		
Event Descriptio	//)	Provide Title/Exp					
Ticket(s)/Pass(e	s) provided by	y agency?	Yes 🗌 No [If no: Oakla	nd A's Name of Source		
				Name of Source			
Was ticket distri		at the behest	No 🗌 Yes	If yes: Chai	ves: Chan, Wilma Official's Name (Last, First)		
of agency offic		- <u> </u>	e 0		ল সম শাতাৰ হয়		
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.							
-	dentify the agenc	y's department o	Number of				
A. Name of A	Name of Agency, Department or Unit			Describe the pu	ublic purpose made pursuant to the agency's policy		
B. •	lame of Individu (Last, First)	al	Number of Ticket(s)/		Identify one of the folic	owing:	
		al		Ceremonial Role		Income	
B. Park, Andrew		al	Ticket(s)/	If checking "Cerem To promote attend	Other or "Other" describe below	Income w: held at a County facility in	
		al	Ticket(s)/ Pass(es)	If checking "Cerem To promote attend order to maximize Ceremonial Role	Other D onial Role" or "Other" describe below dance at a(n) event	Income (w: held at a County facility in enue Income (
Park, Andrew	(Last, Firet)	nization	Ticket(s)/ Pass(es) 6 Number of Ticket(s)/	If checking "Cerem To promote attend order to maximize Ceremonial Role If checking "Cerem	Other Donial Role" or "Other' describe below dance at a(n) event potential County revu	Income	
Park, Andrew	(Last, First)	nization	Ticket(s)/ Pass(es) 6 Number of	If checking "Cerem To promote attend order to maximize Ceremonial Role If checking "Cerem	Other onial Role" or "Other" describe below dance at a(n) event potential County reve Other onial Role" or "Other" describe belo	Income	
Park, Andrew C. Name (include	(Last, Firet)	nization	Ticket(s)/ Pass(es) 6 Number of Ticket(s)/	If checking "Cerem To promote attend order to maximize Ceremonial Role If checking "Cerem	Other onial Role" or "Other" describe below dance at a(n) event potential County reve Other onial Role" or "Other" describe belo	Income	
Park, Andrew	(Last, Firet)	nization escription)	Ticket(s)/ Pass(es) 6 Number of Ticket(s)/ Pass(es)	If checking "Cerem To promote attend order to maximize Ceremonial Role If checking "Cerem Describe the pu	Other onial Role" or "Other" describe belor dance at a(n) event potential County reve Other onial Role" or "Other" describe belo ublic purpose made pursua	Income In	
Park, Andrew C. Name (include Verification	(Last, Firet)	nization escription)	Ticket(s)/ Pass(es) 6 Number of Ticket(s)/ Pass(es)	If checking "Cerem To promote attend order to maximize Ceremonial Role If checking "Cerem Describe the pu erified that the distribution se rtwright	Other onial Role" or "Other" describe below dance at a(n) event potential County reve Other onial Role" or "Other" describe belo	Income	

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C	eremonial Role Even	ts and Tic	ket/Pass	Distributions		A Public Document	
1.	Agency Name	·	Date Stamp	California 802			
	Alameda County			Point			
	Division, Department, or Reg	ion (If Applicabl		For Official Use Only			
	Board of Supervisors						
	Designated Agency Contact (Name, Title)	-				
	Amy Shrago						
	Area Code/Phone Number E-mail				Amendment (Must provide explanation in Part 3.)		
	i102726695 amy.shrago@acgov.org				Date of Original Filing: 07/07/21 (Month, Day, Year)		
2.	Function or Event Infor	mation				Lich	
	Does the agency have a ticke	t policy?	Yes 🖾 No	Face Value o	Face Value of Each Ticket/Pass \$		
	Event Description Oakland A	\'s	7 _ 03 _ 21	/ /			
	Event Description	Provide Title/Exp					
	Ticket(s)/Pass(es) provided b	y agency?	Yes 🗌 No	If no: Oakla	nd Athletics Name of So		
				- Core		urce	
	Was ticket distribution made at the behest No Yes If yes: Carso of agency official?				Official's Name (I	ast, First)	
	Destatente					· · · · · · · · · · · · · · · · · · ·	
ა.	Use Section A to identify the agency is accurrent or unit Our Use Section B to identify an individual Use Section C to identify an outside organization.						
			Number of Ticket(s)/	Describe the public purpose made pursuant to the agency's policy			
			Pass(es)				
	<u> </u>						
	B. Name of Individu	al	Number of Ticket(s)/ Pass(es)		Identify one of the follow	ing:	
		· · ·		Ceremonial Role	Other	Income	
	Hunt, Landon		3	-	nial Role" or "Other" describe below:	1 to contract a second second	
					ance at a County facili evenue from parking a	ty in order to maximize nd concession sales.	
				Ceremonial Role		Income	
	~						
	C. Name of Outside Orga (include address and de		Number of Ticket(s)/ Pass(es)	Describe the pu	blic purpose made pursuan	t to the agency's policy	
4.	Verification				Contraction to the second second	ith the requirements	

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

		Amy Shrago	Chief of Staff	07/07/21
	lead or Designee	Print Name	Title	(Month, Day, Year)
Comment:				
				FPPC Form 802 (4/12)
			FPPC Toll-Free Helpline: 866	ASK-FPPC (866/275-7772)