

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

**A Public Document**

<b>1. Agency Name</b>		<b>Date Stamp</b>	<b>California Form 802</b> <small>For Official Use Only</small>
32nd District Agricultural Association			
Division, Department, or Region (if applicable)			
Street Address			
88 Fair Drive, Costa Mesa, CA 92626			
Designated Agency Contact (Name, Title)		<input type="checkbox"/> <b>Amendment</b> (Must provide explanation in Part 3.)  Date of Original Filing: _____ <small>(month, day, year)</small>	
Sharon Augenstein, CFO			
Area Code/Phone Number	E-mail		
(714) 708-1500	executive@ocfair.com		

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

Title The All-American Rejects Face Value of Each Admission \$ \$25

Description KYSR radio promotions Date(s) 8 / 08 / 12

Ticket(s)/Admission(s) provided by agency? Yes  No  If no: \_\_\_\_\_  
Name of Source

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

Yes  No  If yes: \_\_\_\_\_  
Official's Name (Last, First) and Title

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

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	<ul style="list-style-type: none"> <li>• Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description.</li> <li>• If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.</li> </ul>	
3400 W. Olive Ave., Suite 550, Burbank	30	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Radio Promotion (Policy 2.11.3.E.iii.d)	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>		Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>		Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>		Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>		Income <input type="checkbox"/>

**3. Verification**

(c)(1) \_\_\_\_\_ Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above,

Sharon Augenstein	CFO	05/15/12
Print Name	Title	(month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)  
 PA120808\_03