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

A Public Document

1. Agency Name

County of Alameda

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

Board of Supervisors

Street Address

1221 Oak Street, Suite 536

Designated Agency Contact *(Name, Title)*

Anna Gee, Operations Manager

Area Code/Phone Number 510-891-5585

E-mail anna.gee@acgov.org

Date Stamp

California Form 802

For Official Use Only

☐ **Amendment** *(Must provide explanation in Part 3.)*

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

2. Function, Event, or Ceremonial Role Information

Title Warriors vs. Trailblazers

Face Value of Each Admission $ 95.00

Description Basketball game

Date(s) 01 / 27 / 12 ___/___/___

Ticket(s)/Admission(s) provided by agency? Yes ☑ **No** ☐ If no: Golden State Warriors *Name of Source*

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

Yes ☑ **No** ☐ If yes: Miley, Nate, Alameda County Board of Supervisors, District 4 *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	• 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. • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.	
Brooks, Patricia	2	Yes ☐ No ☑	To promote attendance at an event held at a County facility in order to maximize potential revenue from parking and concession sales.	Income ☐
Pete, Geoffrey	2	Yes ☐ No ☑	To promote an event being held at a County facility in order to maximize potential County revenue from parking and	Income ☐
Hunt, Clarence	2	Yes ☐ No ☑	To promote an event being held at a County facility in order to maximize potential County revenue from parking and	Income ☐
Dones, Alan	2	Yes ☐ No ☐	To promote an event being held at a County facility in order to maximize potential County revenue from parking and	Income ☐
		Yes ☐ No ☐		Income ☐

[redacted] *ulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above,*

Anna Gee (Print Name) | Operations Manager (Title) | 01/23/2012 *(month, day, year)*

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