

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

A Public Document

1. Agency Name County of Alameda Division, Department, or Region <i>(if applicable)</i> Board of Supervisors Street Address 1221 Oak Street, Suite 536 Designated Agency Contact <i>(Name, Title)</i> Anna Gee, Operations Manager Area Code/Phone Number E-mail 510-891-5585 anna.gee@acgov.org	Date Stamp	California Form 802 For Official Use Only
		<input type="checkbox"/> Amendment <i>(Must provide explanation in Part 3.)</i> Date of Original Filing: _____ <i>(month, day, year)</i>

2. Function, Event, or Ceremonial Role Information

Title Warriors vs. Bucks Face Value of Each Admission \$ 95.00

Description Basketball game Date(s) 03 / 16 / 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	<ul style="list-style-type: none"> • 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.
United Seniors of Oakland and Alameda County	4	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	To reward a non profit organization for its contributions to the community Income <input type="checkbox"/>
7200 Bancroft Ave, Ste 251-Oakland, CA 94605		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
senior advocacy		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"/>

I have verified that the distribution of admissions, set forth above,

Anna Gee Operations Manager 02/29/2012
Print Name Title (month, day, year)

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