

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

A Public Document

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
County of Alameda Division, Department, or Region (If applicable) Board of Supervisors Street Address 1221 Oak Street, Suite 536		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: _____ <small>(month, day, year)</small>	
Designated Agency Contact (Name, Title) Crystal Hishida Graff, Clerk, Board of Supervisors			
Area Code/Phone Number (510) 272-3882	E-mail crystal.hishida@acgov.org		

2. Function, Event, or Ceremonial Role Information

Title A's Game Skybox Face Value of Each Admission \$ 1,500⁰⁰
 Description BASEBALL Date(s) 6, 22, 12
 Ticket(s)/Admission(s) provided by agency? Yes No If no: Oakland Athletics
Name of Source

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

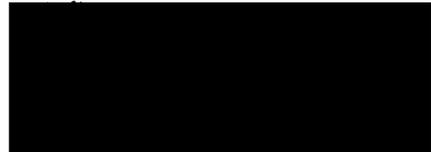
Yes No If yes: Alameda County Supervisor Scott Haggerty, District 1
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First, or Organization) <small>(Name, Address, Description)</small>	Number of Admission(s) Provided	Agency Official?	Explanation <small>(If for income, describe the public interest, including organizational fees, performed by an agency official, that benefit organization.)</small>	Income □
<u>BATA</u>	<u>20</u>	Yes <input type="checkbox"/> No <input type="checkbox"/>	<u>To reward a school or nonprofit organization for its contributions to the community</u>	<input type="checkbox"/>
<u>Bay Area Toll Authority</u>		Yes <input type="checkbox"/> No <input type="checkbox"/>		<input type="checkbox"/>
<u>101 Eighth St. Oakland, CA 94607</u>		Yes <input type="checkbox"/> No <input type="checkbox"/>		<input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>		<input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>		<input type="checkbox"/>

3. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above,



Lee Ann Ferguson

Ticket Administrator

Print Name

Title

11-6-12
(month, day, year)

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