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

A Public Document

1. Agency Name	Date Stamp	California Form 802
Alameda County		For Official Use Only
Division, Department, or Region *(If Applicable)*		
Board of Supervisors		
Designated Agency Contact *(Name, Title)*		
Alex Boskovich		☐ **Amendment** *(Must provide explanation in Part 3.)*
Area Code/Phone Number (510) 272-6693 / **E-mail** alex.boskovich@acgov.org		**Date of Original Filing:** _____ *(Month, Day, Year)*

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐

Face Value of Each Ticket/Pass $ $23.85

Event Description Disney on Ice
Provide Title/Explanation

Date(s) 2 / 26 / 14 ___/___/___

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒

If no: Golden State Warriors
Name of Source

Was ticket distribution made at the behest of agency official? No ☐ Yes ☒

If yes: Alameda County Supervisor Wilma Chan
Official's Name (Last, First)

3. 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.

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Pass(es)	Identify one of the following:
Harncharvej, Penny	4	Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:* To reward a community volunteer for her service to the public.
	4	Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*

C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy

4. Verification

I ha[redacted] Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

[redacted]	Alex Boskovich	Senior Legislative Aide	2/4/14
[redacted]gnee	*Print Name*	*Title*	*(Month, Day, Year)*

Comment: _____