

**Tickets Provided by Agency Report**

**A Public Document**

TICKETS PROVIDED BY AGENCY REPORT

<b>1. Agency Name</b> COUNTY OF ALAMEDA		Date Stamp	<b>California Form 802</b> For Official Use Only
Division, Department, or Region (if applicable)			
Street Address 1221 OAK STREET, #555, OAKLAND, CA 94612			
Area Code/Phone Number (510) 272-3882	E-mail crystal.hishida@acgov.org	<input type="checkbox"/> Amendment (Must explain in Part 5.)  Date of Original Filing: <u>03/01/2010</u> <small>(month, day, year)</small>	
Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 3 / 24 / 10 Description of Event: Golden State Warriors Game  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Supervisor Alice Lai-Bitker, District 3

Name of Individual or Organization: Wa Sung Community Service Club Number of Tickets: 4


Description of Organization: An organization committed to fostering understanding among all people in the community

Address of Organization: PO Box 1561, Oakland, CA 94604  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To promote attendance at an event held at a County facility in order to maximize County revenue from concession sales

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 3/2/10  
Signature of Agency Head or Designee Print Name Title (month, day, year)

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

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<b>Street Address</b> OAKLAND, CA 94612			
<b>Area Code/Phone Number</b> (510) 272-3882	<b>E-mail</b> crystal.hishida@acgov.org	<input type="checkbox"/> <b>Amendment</b> (Must explain in Part 5.)	
<b>Agency Contact</b> (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office		<b>Date of Original Filing:</b> _____ (month, day, year)	

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 27 / 10 Description of Event: Golden State Warriors vs. Dallas Mavericks

Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District

Name of Individual or Organization: National Women's Political Caucus-Alameda N. Number of Tickets: 4


Description of Organization: Works to build women's participation in the political process.

Address of Organization: 484 Lake Park Avenue PMB 305 Oakland CA 94610  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a school or nonprofit organization for its contributions to the community.

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.


 Signature of Agency Head or Designee
 CRYSTAL HISHIDA GRAFF
 Print Name
 PRINCIPAL ANALYST
 Title
 3/2/10
 (month, day, year)

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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 05 / 10 Description of Event: Disney on Ice - World of Fantasy  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 49.00

Agency Event  Yes  No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District

Name of Individual or Organization: East Meets West Number of Tickets: 4

Description of Organization: Transform the health, education and communities of disadvantaged people.

Address of Organization: 1611 Telegraph Avenue, Suite 1420 Oakland CA 94612  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a school or nonprofit organization for its contributions to the community.

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

	CRYSTAL HISHIDA GRAFF	PRINCIPAL ANALYST	<u>2/3/10</u>
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 04 / 10 Description of Event: Disney On Ice  
 \_\_\_\_\_ Face Value of Ticket: \$ 49.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)


Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4  
 Name of Individual or Organization: United Seniors of Oakland & Alameda County Number of Tickets: 4  
 Description of Organization: Senior Advocacy  
 Address of Organization: 7200 Bancroft Ave, Ste 178 - Oakland, CA 94605  
Number and Street City State Zip Code  
 Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To promote health and motivate and provide expanded opportunities to vulnerable populations in the County such as

**5. Verification**

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 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 3/3/10  
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)  
the disabled, underprivileged, seniors and youth in foster care.

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**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 03 / 10 Description of Event: Disney On Ice  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 59.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)


Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4  
 Name of Individual or Organization: United Seniors of Oakland & Alameda County Number of Tickets: 4  
 Description of Organization: Senior Advocacy  
 Address of Organization: 7200 Bancroft Ave, Ste 178 - Oakland, CA 94605  
Number and Street City State Zip Code  
 Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To promote health and motivate and provide expanded opportunities to vulnerable populations in the County such as

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the disabled, underprivileged, seniors and youth in foster care.

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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 06 / 10 Description of Event: Disney On Ice  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 74.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)


Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4  
 Name of Individual or Organization: Jessica Zendejas Number of Tickets: 4  
 Description of Organization: \_\_\_\_\_  
 Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code  
 Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a community volunteer for her service to the public

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

	CRYSTAL HISHIDA GRAFF	PRINCIPAL ANALYST	<u>3/4/10</u>
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 06 / 10 Description of Event: Disney on Ice Presents Princess Classics  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 74.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Supervisor Alice Lai-Bitker, District 3

Name of Individual or Organization: Kathy Martins Number of Tickets: 4


Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To promote attendance at an event held at a County facility in order to maximize County revenue from concession sales

**5. Verification**

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**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 15 / 10 Description of Event: Golden State Warriors vs. Los Angeles Lakers  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Carson, Keith	4	To promote attendance at a County sponsored event.

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Supervisor Keith Carson, District 5

Name of Individual or Organization: \_\_\_\_\_ Number of Tickets: \_\_\_\_\_


Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
 \_\_\_\_\_

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

	CRYSTAL HISHIDA GRAFF	PRINCIPAL ANALYST	<u>3/19/10</u>
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(month, day, year)</small>

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<b>Agency Contact</b> (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 13 / 10 Description of Event: Golden State Warriors vs. Toronto Raptors

Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Carson, Keith	4	To promote attendance at a event held at a County facility

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Supervisor Keith Carson, District 5

Name of Individual or Organization: \_\_\_\_\_ Number of Tickets: \_\_\_\_\_


Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
 \_\_\_\_\_

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

	CRYSTAL HISHIDA GRAFF	PRINCIPAL ANALYST	<u>3/9/10</u>
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 27 / 10 Description of Event: Golden State Warriors vs. Dallas Mavericks  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Carson, Keith	4	To promote attendance at a event held at a County facility

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Supervisor Keith Carson, District 5

Name of Individual or Organization: \_\_\_\_\_ Number of Tickets: \_\_\_\_\_


Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
 \_\_\_\_\_

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.


 \_\_\_\_\_ CRYSTAL HISHIDA GRAFF \_\_\_\_\_ PRINCIPAL ANALYST \_\_\_\_\_ 3/9/10  
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**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 27 / 10 Description of Event: Golden State Warriors vs. Dallas Mavericks  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District

Name of Individual or Organization: Ken Berrick Number of Tickets: 4


Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a community volunteer for his or her service to the public.

**5. Verification**

*I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.*

	<u>CRYSTAL HISHIDA GRAFF</u>	<u>PRINCIPAL ANALYST</u>	<u>3/19/10</u>
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(month, day, year)</small>

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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 13 / 10 Description of Event: Golden State Warriors vs. Toronto Raptors  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District

Name of Individual or Organization: Asian Youth Promoting Advocacy & Leadership Number of Tickets: 4


Description of Organization: Fight social inequities and to advance an agenda for progressive social change.

Address of Organization: 310 8th Street, Suite 308 Oakland, CA 94607  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a school or nonprofit organization for its contributions to the community.

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

	<u>CRYSTAL HISHIDA GRAFF</u>	<u>PRINCIPAL ANALYST</u>	<u>3/19/10</u>
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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 24 / 10 Description of Event: Golden State Warriors vs. Memphis Grizzlies  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 8 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)


Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District  
 Name of Individual or Organization: Korean Community Center of the East Bay Number of Tickets: 8  
 Description of Organization: Empower the Korean American and other communities of the Bay Area through education  
 Address of Organization: 4390 Telegraph Ave. Suite A Oakland, CA 94609  
Number and Street City State Zip Code  
 Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a school or nonprofit organization for its contributions to the community.

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 3/19/10  
Signature of Agency Head or Designee Print Name Title (month, day, year)

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

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TICKETS PROVIDED BY AGENCY REPORT

<b>1. Agency Name</b> COUNTY OF ALAMEDA		Date Stamp	<b>California Form 802</b> For Official Use Only
Division, Department, or Region (if applicable) 1221 OAK STREET, #555			
Street Address OAKLAND, CA 94612			
Area Code/Phone Number (510) 272-3882	E-mail crystal.hishida@acgov.org	<input type="checkbox"/> Amendment (Must explain in Part 5.)	
Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office		Date of Original Filing: _____ (month, day, year)	

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 15 / 10 Description of Event: Golden State Warriors vs. Los Angeles Lakers  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District

Name of Individual or Organization: Sharifa Williams Number of Tickets: 4

Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To promote attendance at an event held at a County facility in order to maximize potential County revenue from parking

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 3/19/10  
Signature of Agency Head or Designee Print Name Title (month, day, year)

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<b>1. Agency Name</b>		Date Stamp	<b>California Form 802</b> For Official Use Only
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<b>Area Code/Phone Number</b> (510) 272-3882	<b>E-mail</b> crystal.hishida@acgov.org	<input type="checkbox"/> <b>Amendment</b> (Must explain in Part 5.)	
<b>Agency Contact</b> (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office		<b>Date of Original Filing:</b> _____ (month, day, year)	

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 15 / 10 Description of Event: Golden State Warriors vs. Los Angeles Lakers

Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 1 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District

Name of Individual or Organization: Nathan Reyes Number of Tickets: 1


Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To promote attendance at an event held at a County facility in order to maximize potential County revenue from parking

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.


CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 3/9/10  
Signature of Agency Head or Designee Print Name Title (month, day, year)

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

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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 15 / 10 Description of Event: Golden State Warriors vs. Los Angeles Lakers  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 1 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District

Name of Individual or Organization: Mateo Reyes Number of Tickets: 1


Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a County employee for his or her exemplary service to the public.

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.


 \_\_\_\_\_ CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 3/9/10  
Signature of Agency Head or Designee Print Name Title (month, day, year)

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



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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 15 / 10 Description of Event: Golden State Warriors vs. Los Angeles Lakers  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 3 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District

Name of Individual or Organization: Andrea Riquelme, Brighter Beginnings Number of Tickets: 3


Description of Organization: Supports healthy births and children's successful development by partnering with parents.

Address of Organization: 2648 International Boulevard Oakland, CA 94601  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a school or nonprofit organization for its contributions to the community.

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

	CRYSTAL HISHIDA GRAFF	PRINCIPAL ANALYST	<u>3/19/10</u>
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 15 / 10 Description of Event: Golden State Warriors vs. Los Angeles Lakers  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 1 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District

Name of Individual or Organization: Aisha Brown Number of Tickets: 1


Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a County employee for his or her exemplary service to the public or to encourage staff development.

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

	CRYSTAL HISHIDA GRAFF	PRINCIPAL ANALYST	<u>3/9/10</u>
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 07 / 10 Description of Event: Disney on Ice  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 74.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

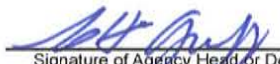
Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Supervisor Scott Haggerty, District One Supervisor  
 Name of Individual or Organization: Charles Gilcrest Number of Tickets: 4  
 Description of Organization: \_\_\_\_\_  
 Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code  
 Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a community volunteer for his service to the public

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.


 \_\_\_\_\_  
Signature of Agency Head or Designee

CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST  
Print Name Title

3/5/10  
(month, day, year)

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

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Area Code/Phone Number (510) 272-3882	E-mail crystal.hishida@acgov.org	<input type="checkbox"/> Amendment (Must explain in Part 5.)  Date of Original Filing: <u>03/10/2010</u> <small>(month, day, year)</small>	
Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 3 / 24 / 10 Description of Event: Golden State Warriors Game  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Supervisor Alice Lai-Bitker, District 3

Name of Individual or Organization: Kale Jenks Number of Tickets: 4

Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To promote attendance at an event held at a County facility in order to maximize County revenue from concession sales

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.


 \_\_\_\_\_ CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 3/12/10  
Signature of Agency Head or Designee Print Name Title (month, day, year)

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

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<b>1. Agency Name</b> COUNTY OF ALAMEDA		Date Stamp	<b>California Form 802</b> For Official Use Only
Division, Department, or Region (if applicable) 1221 OAK STREET, #555			
Street Address OAKLAND, CA 94612			
Area Code/Phone Number (510) 272-3882	E-mail crystal.hishida@acgov.org	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	
Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 15 / 10 Description of Event: Golden State Warriors vs. Los Angeles Lakers  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 1 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District

Name of Individual or Organization: Michael Hutchings Number of Tickets: 1

Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

To promote attendance at a County sponsored event or event held at a County facility.

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.


 \_\_\_\_\_  
Signature of Agency Head or Designee

CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST  
Print Name Title

3/15/10  
(month, day, year)

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

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<b>1. Agency Name</b> COUNTY OF ALAMEDA		Date Stamp	<b>California Form 802</b> <small>For Official Use Only</small>
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Area Code/Phone Number (510) 272-3882	E-mail crystal.hishida@acgov.org	<input type="checkbox"/> Amendment (Must explain in Part 5.)	
Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office		Date of Original Filing: _____ <small>(month, day, year)</small>	

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 15 / 10 Description of Event: Golden State Warriors vs. Los Angeles Lakers  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 1 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official <small>(Last, First)</small>	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District  
 Name of Individual or Organization: Rodney Brooks Number of Tickets: 1  
 Description of Organization: \_\_\_\_\_  
 Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code  
 Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a County employee for his or her exemplary service to the public.

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

 <small>Signature of Agency Head or Designee</small>	<u>CRYSTAL HISHIDA GRAFF</u> <small>Print Name</small>	<u>PRINCIPAL ANALYST</u> <small>Title</small>	<u>3/15/10</u> <small>(month, day, year)</small>
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Comment: (Use this space or an attachment for any additional information including amendment explanation.)

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Area Code/Phone Number (510) 272-3882	E-mail crystal.hishida@acgov.org	<input type="checkbox"/> Amendment (Must explain in Part 5.)	
Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office		Date of Original Filing: _____ (month, day, year)	

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 27 / 10 Description of Event: Golden State Warriors vs. Dallas Mavericks  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

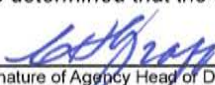
Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District  
 Name of Individual or Organization: Annie Flores, Women's Economic Agenda Proj. Number of Tickets: 4  
 Description of Organization: Work to change societal and governmental policies that relegate women to the bottom.  
 Address of Organization: 449 15th Street, 2nd Floor Oakland CA 94612  
Number and Street City State Zip Code  
 Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a community volunteer for his or her service to the public.

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

 Signature of Agency Head or Designee	<u>CRYSTAL HISHIDA GRAFF</u> Print Name	<u>PRINCIPAL ANALYST</u> Title	<u>3/17/10</u> (month, day, year)
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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 3 / 24 / 10 Description of Event: Golden State Warriors Game  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Laws, Jerl	4	To promote attendace at a County facility to max sales

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Supervisor Alice Lai-Bitker, District 3

Name of Individual or Organization: \_\_\_\_\_ Number of Tickets: \_\_\_\_\_


Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To promote attendance at an event held at a County facility in order to maximize County revenue from concession sales

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 3/18/10  
Signature of Agency Head or Designee Print Name Title (month, day, year)

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



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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 04 / 10 / 10 Description of Event: Alicia Keys  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 88.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Wilson, Shawn	4	To promote attendance at a County facility and max sales

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Supervisor Alice Lai-Bitker, District 3

Name of Individual or Organization: \_\_\_\_\_ Number of Tickets: \_\_\_\_\_


Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To promote attendance at an event held at a County facility in order to maximize County revenue from concession sales

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 3/18/10  
Signature of Agency Head or Designee Print Name Title (month, day, year)

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

**Tickets Provided by Agency Report**

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TICKETS PROVIDED BY AGENCY REPORT

<b>1. Agency Name</b> COUNTY OF ALAMEDA <hr/> <b>Division, Department, or Region</b> <i>(if applicable)</i> <hr/> <b>Street Address</b> 1221 OAK STREET, #555, OAKLAND, CA 94612 <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:25%; border: none;"><b>Area Code/Phone Number</b></td> <td style="border: none;"><b>E-mail</b></td> </tr> <tr> <td style="border: none;">(510) 272-3882</td> <td style="border: none;">crystal.hishida@acgov.org</td> </tr> </table> <hr/> <b>Agency Contact</b> <i>(name and title)</i> Crystal Hishida Graff, Principal Analyst, County Administrator's Office	<b>Area Code/Phone Number</b>	<b>E-mail</b>	(510) 272-3882	crystal.hishida@acgov.org	Date Stamp	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center;"> <b>California Form 802</b>                      For Official Use Only                 </td> </tr> </table>	<b>California Form 802</b> For Official Use Only
<b>Area Code/Phone Number</b>	<b>E-mail</b>						
(510) 272-3882	crystal.hishida@acgov.org						
<b>California Form 802</b> For Official Use Only							
<input type="checkbox"/> <b>Amendment</b> <i>(Must explain in Part 5.)</i>		Date of Original Filing: <u>3/17/10</u> <i>(month, day, year)</i>					

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 04 / 06 / 10 Description of Event: Michael Buble  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 102.75

Agency Event  Yes  No *(Identify source of tickets below.)*

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official <small>(Last, First)</small>	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Supervisor Alice Lai-Bitker, District 3

Name of Individual or Organization: Dana Sadetsky Number of Tickets: 4

Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To promote attendance at an event held at a County facility in order to maximize County revenue from concession sales

**5. Verification**

*I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.*

 Signature of Agency Head or Designee	CRYSTAL HISHIDA GRAFF Print Name	PRINCIPAL ANALYST Title	<u>3/18/10</u> (month, day, year)
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Comment: *(Use this space or an attachment for any additional information including amendment explanation.)*

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COUNTY OF ALAMEDA			
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<b>Area Code/Phone Number</b> (510) 272-3882	<b>E-mail</b> crystal.hishida@acgov.org	<input type="checkbox"/> <b>Amendment</b> (Must explain in Part 5.)  <b>Date of Original Filing:</b> _____ (month, day, year)	
<b>Agency Contact</b> (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 04 / 06 / 10 Description of Event: Michael Buble  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 102.75

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 2 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District

Name of Individual or Organization: Carol Music Number of Tickets: 2

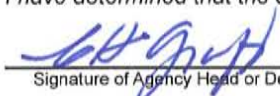
Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To promote attendance at a event held at a County facility in order to maximize potential County revenues.

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.


CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 3/23/10  
Signature of Agency Head or Designee Print Name Title (month, day, year)

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<b>Agency Contact</b> (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office		<b>Date of Original Filing:</b> _____ (month, day, year)	

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 04 / 10 / 10 Description of Event: Alicia Keys  
\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_ Face Value of Ticket: \$ 88.00

Agency Event  Yes  No (Identify source of tickets below.)  
Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District

Name of Individual or Organization: Bruce Boulogny Number of Tickets: 4


Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a community volunteer for his or her service to the public.

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

	<u>CRYSTAL HISHIDA GRAFF</u>	<u>PRINCIPAL ANALYST</u>	<u>2/23/10</u>
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

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

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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office		Date of Original Filing: _____ <small>(month, day, year)</small>	

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 04 / 11 / 10 Description of Event: Basketball Game  
 \_\_\_\_\_ Face Value of Ticket: \$ 95-

Agency Event  Yes  No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 1 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: Lillian Litzey Number of Tickets: 1


Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a community volunteer for her contribution to the public

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

	CRYSTAL HISHIDA GRAFF	PRINCIPAL ANALYST	<u>3/28/10</u>
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(month, day, year)</small>

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

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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 04 / 11 / 10 Description of Event: Basketball Game  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95 -

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 1 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: Aron Martin Number of Tickets: 1

Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a student for outstanding scholastic achievement

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 3/23/10  
Signature of Agency Head or Designee Print Name Title (month, day, year)

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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office		Date of Original Filing: _____ (month, day, year)	

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 04 / 06 / 10 Description of Event: Michael Buble  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 102.75

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: United Seniors of Oakland & Alameda County Number of Tickets: 4


Description of Organization: Senior Advocacy

Address of Organization: 7200 Bancroft Avenue, Suite 178 - Oakland, CA 94605  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a non profit organization for its contributions to the community

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 3/23/10  
Signature of Agency Head or Designee Print Name Title (month, day, year)

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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 04 / 06 / 10 Description of Event: Michael Buble  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 102.75

Agency Event  Yes  No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 2 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Carson, Keith	2	To promote attendance at a event held at a County facility

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Supervisor Keith Carson, District 5

Name of Individual or Organization: \_\_\_\_\_ Number of Tickets: \_\_\_\_\_


Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
 \_\_\_\_\_

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

 Signature of Agency Head or Designee	<u>CRYSTAL HISHIDA GRAFF</u> Print Name	<u>PRINCIPAL ANALYST</u> Title	<u>2/23/10</u> <small>(month, day, year)</small>
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Comment: (Use this space or an attachment for any additional information including amendment explanation.)  
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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 04 / 11 / 10 Description of Event: Basketball Game  
 \_\_\_\_\_ Face Value of Ticket: \$ 95-

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 2 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: Vannoy Elementary Number of Tickets: 2

Description of Organization: Castro Valley Public School

Address of Organization: 5100 Vannoy Avenue - Castro Valley, CA 94546  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a school for its contributions to the community

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 3/23/10  
Signature of Agency Head or Designee Print Name Title (month, day, year)

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

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<b>Area Code/Phone Number</b> (510) 272-3882	<b>E-mail</b> crystal.hishida@acgov.org	<input type="checkbox"/> <b>Amendment</b> (Must explain in Part 5.)	
<b>Agency Contact</b> (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office		<b>Date of Original Filing:</b> _____ (month, day, year)	

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 04 / 11 / 10 Description of Event: Basketball Game  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95-

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 12 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: United Seniors of Oakland & Alameda County Number of Tickets: 12

Description of Organization: Senior Advocacy

Address of Organization: 7200 Bancroft Avenue, Suite 178 - Oakland, CA 94605  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To promote health, motivate and provide expanded opportunities to seniors and the disabled.

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST   
Signature of Agency Head or Designee Print Name Title (month, day, year)

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

2 parking pass

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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office		Date of Original Filing: _____ <small>(month, day, year)</small>	

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 27 / 10 Description of Event: Golden State Warriors vs. Dallas Mavericks  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official <small>(Last, First)</small>	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District

Name of Individual or Organization: Veronica Tubera Number of Tickets: 4


Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To promote attendance at a event held at a County facility in order to maximize potential County revenue from parking.

**5. Verification**

*I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.*

 <small>Signature of Agency Head or Designee</small>	<u>CRYSTAL HISHIDA GRAFF</u> <small>Print Name</small>	<u>PRINCIPAL ANALYST</u> <small>Title</small>	<u>3/24/10</u> <small>(month, day, year)</small>
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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 04 / 03 / 10 Description of Event: Hot Country Nights  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 50.25each

Agency Event  Yes  No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 2 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: Chuck & Peggy Moore Number of Tickets: 2


Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a community volunteer for her service to the public

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

	CRYSTAL HISHIDA GRAFF	PRINCIPAL ANALYST	<u>3/26/10</u>
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

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

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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 04 / 14 / 10 Description of Event: MUSE  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 49.00

Agency Event  Yes  No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Supervisor Alice Lai-Bitker, District 3

Name of Individual or Organization: Tyler Sanderson Number of Tickets: 4


Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To promote attendance at an event held at a County facility in order to maximize County revenue from concession sales

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

	CRYSTAL HISHIDA GRAFF	PRINCIPAL ANALYST	<u>3/29/10</u>
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

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

**Tickets Provided by Agency Report**

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TICKETS PROVIDED BY AGENCY REPORT

<b>1. Agency Name</b> COUNTY OF ALAMEDA		Date Stamp	<b>California Form 802</b> For Official Use Only
Division, Department, or Region (if applicable) 1221 OAK STREET, #555			
Street Address OAKLAND, CA 94612			
Area Code/Phone Number (510) 272-3882	E-mail crystal.hishida@acgov.org	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	
Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 07 / 10 Description of Event: Disney on Ice -  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 74.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 3 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District

Name of Individual or Organization: Juan Lopez Number of Tickets: 3

Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To promote attendance at an event held at a County facility in order to maximize potential County revenue.

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

	CRYSTAL HISHIDA GRAFF	PRINCIPAL ANALYST	<u>3/3/10</u>
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

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

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Street Address OAKLAND, CA 94612			
Area Code/Phone Number (510) 272-3882	E-mail crystal.hishida@acgov.org	<input type="checkbox"/> Amendment <i>(Must explain in Part 5.)</i>	
Agency Contact <i>(name and title)</i> Crystal Hishida Graff, Principal Analyst, County Administrator's Office		Date of Original Filing: _____ <small><i>(month, day, year)</i></small>	

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 04 / 03 / 10 Description of Event: Hot Country Nights  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 50.25each

Agency Event  Yes  No *(Identify source of tickets below.)*

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 2 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** *(use a continuation sheet for additional names)*

Name of Official <small>(Last, First)</small>	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** *(Provided at the behest of an agency official.)*

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: Eddie and Helen Salas Number of Tickets: 2


Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: *(Describe the public purpose for the distribution to the organization.)*  
To promote attendance at an event held at a County facility in order to maximize potential County revenue from parking

**5. Verification**

*I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.*

 <small>Signature of Agency Head or Designee</small>	<u>CRYSTAL HISHIDA GRAFF</u> <small>Print Name</small>	<u>PRINCIPAL ANALYST</u> <small>Title</small>	<u>3/31/10</u> <small><i>(month, day, year)</i></small>
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Comment: *(Use this space or an attachment for any additional information including amendment explanation.)*  
and concession sales

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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 07 / 10 Description of Event: Disney on Ice  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 74.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 1 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Carson, Keith	1	To obtain oversight of facilities or events.

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Supervisor Keith Carson, District 5

Name of Individual or Organization: \_\_\_\_\_ Number of Tickets: \_\_\_\_\_

Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
 \_\_\_\_\_

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 3/3/10  
Signature of Agency Head of Designee Print Name Title (month, day, year)

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



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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 03 / 07 / 10 Description of Event: Disney On Ice  
 \_\_\_\_\_ Face Value of Ticket: \$ 74

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)


Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4  
 Name of Individual or Organization: Mark Damerla Number of Tickets: 4  
 Description of Organization: \_\_\_\_\_  
 Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code  
 Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a community volunteer for his service to the public

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 3/2/10  
Signature of Agency Head or Designee Print Name Title (month, day, year)

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

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TICKETS PROVIDED BY AGENCY REPORT

<b>1. Agency Name</b> COUNTY OF ALAMEDA		Date Stamp	<b>California Form 802</b> For Official Use Only
<b>Division, Department, or Region</b> (if applicable) 1221 OAK STREET, #555			
<b>Street Address</b> OAKLAND, CA 94612			
<b>Area Code/Phone Number</b> (510) 272-3882	<b>E-mail</b> crystal.hishida@acgov.org	<input type="checkbox"/> <b>Amendment</b> (Must explain in Part 5.)  <b>Date of Original Filing:</b> _____ (month, day, year)	
<b>Agency Contact</b> (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 04 / 06 / 10 Description of Event: Michael Buble  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 102.75

Agency Event  Yes  No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: GOLDEN STATE WARRIORS

Number of Tickets Received: 4 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: ALAMEDA COUNTY SUPERVISOR SCOTT HAGGERTY, DISTRICT 1

Name of Individual or Organization: JESSE GARCIA Number of Tickets: 4


Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
REWARD INDIVIDUAL FOR CONTRIBUTIONS TO THE COMMUNITY

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 3/29/10  
Signature of Agency Head or Designee Print Name Title (month, day, year)

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