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

emonial Role Events	s and no		A Public Document		
gency Name		Date Stamp	California 802		
ounty of Sonoma			i cinii		
vision, Department, or Regio	n (If Applicable	1	For Official Use Only		
ounty Administrator's Office					
				-	
5 Administration Drive, Sar	nta Rosa, C	A 95403		energial energiation and an	n - her shifteendrik sik it is sitter a to be a
				Amendment (Must pi	rovide explanation in Part 3.)
7-565-2241	repstein@so	onoma-count	ty.org	Date of Original Filing: .	(Month, Day, Year)
Inction or Event Inform	ation	and a second			(Monal, Day, Teal)
		Yes 🛛 No	☐ Face Value	of Each Ticket/Pass \$	\$12 Admission /\$5 Parki
ent Description Gravensteir	n Apple Fair				8 , 10 , 14
			Sono	ma County Farm Trails	
ket(s)/Pass(es) provided by	agency?	Yes 🗌 No		Name of Sou	Irce
s ticket distribution made at	the behest	No 🛛 Yes			
agency official?				Official's Name (L	ast, First)
ecipients	s department or	unit e Use Sec	tion B to identify an individ	tual • Use Section C to ident	ify an outside organization
	THE REAL PROPERTY	Number of Ticket(s)/ Pass(es)	Production of the second second second		
Board of Supervisors Office		10	Ticket Policy Section III F		
Name of Individual		Number of Ticket(s)/		Identify one of the followi	ng:
	10 100	Pass(es)	Interest Constant		
Rabbitt, David (1 parking)		2 tiks	If checking "Ceremo	nial Role" or "Other" describe below:	Income
Gorin, Susan (1 parking)		2 tiks	If checking "Ceremo	nial Role" or "Other" describe below:	Income
Name of Outside Organiz		Number of			
	punty of Sonoma vision, Department, or Regic punty Administrator's Office signated Agency Contact (A 5 Administration Drive, San a Code/Phone Number 7-565-2241 Inction or Event Inform es the agency have a ticket ent Description Gravensteir ket(s)/Pass(es) provided by s ticket distribution made at agency official? ecipients se Section A to identify the agency's Name of Agency, Departmen bard of Supervisors Office Name of Individual (Last, First) bbitt, David (1 parking)	punty of Sonoma vision, Department, or Region (If Applicable punty Administrator's Office signated Agency Contact (Name, Title) 5 Administration Drive, Santa Rosa, C/ pa Code/Phone Number 7-565-2241 Inction or Event Information es the agency have a ticket policy? ent Description Gravenstein Apple Fair Provide Title/Expl ket(s)/Pass(es) provided by agency? es ticket distribution made at the behest agency official? ecipients se Section A to identify the agency's department or Name of Agency, Department or Unit bard of Supervisors Office Name of Individual (Last, First)	Jointy of Sonoma vision, Department, or Region (If Applicable) Jointy Administrator's Office signated Agency Contact (Name, Title) 5 Administration Drive, Santa Rosa, CA 95403 Jaa Code/Phone Number 7-565-2241 Inction or Event Information es the agency have a ticket policy? Yes ⊠ No ent Description Gravenstein Apple Fair Provide Title/Explanation ket(s)/Pass(es) provided by agency? Yes `agency official? Se Section A to identify the agency's department or unit. • Use Section A to identify the agency's department or unit. Name of Agency, Department or Unit Number of Ticket(s)/ pass(es) bard of Supervisors Office 10 Name of Individual (Last, First) Abbitt, David (1 parking)	Junty of Sonoma Vision, Department, or Region (If Applicable) Junty Administrator's Office signated Agency Contact (Name, Title) 5 Administration Drive, Santa Rosa, CA 95403 Date Code/Phone Number E-mail 7-565-2241 repstein@sonoma-county.org Unction or Event Information es the agency have a ticket policy? Yes ⊠ No □ Face Value ent Description Gravenstein Apple Fair Date(s) Provide Title/Explanation Date(s) ket(s)/Pass(es) provided by agency? Yes □ No ⊠ If no: Sono Sono sticket distribution made at the behest No ⊠ Yes □ If yes:	Jounty of Sonoma Itsion, Department, or Region (If Applicable) Jounty Administrator's Office signated Agency Contact (Name, Title) 5 Administration Drive, Santa Rosa, CA 95403 Jaa Code/Phone Number T-565-2241 repstein@sonoma-county.org Date of Original Filling: . Inction or Event Information es the agency have a ticket policy? Yes ⊠ No □ Face Value of Each Ticket/Pass \$ ent Description Gravenstein Apple Fair Provide Title/Explanation Date(s) 8 / 9 / 14 Name of Society Yes □ No ⊠ Yes □ If no: Sonoma County Farm Trails Name of Society Name of Agency, Department or unit • Use Section B to Identify an individual. • Use Section C to Identify Name of Agency, Department or Unit Number of Ticket of Pass(es) Describe the public purpose made pursuant Pass(es) Pard of Supervisors Office 10 Ticket Policy Section III F Name of Individual (tar, Freq) Number of Ticket(s) Identify one of the followin Itage (care freq) 2 tiks Ceremonial Role □ Other ⊠ Describe the outil F Name of Individual (tar, Freq) </td

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Roxanne Epotein	Roxanne Epstein	County Ticket Administrator	9/9/2014
Signature of Agency Head or Designee	Print Name	Title	(Month, Day, Year)

Comment: ____



Agency Name

County of Sonoma

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:
Carrillo, Efren (1 parking)	2 tix	Ceremonial Role Cother Income Income If checking "Ceremonial Role" or "Other" describe below: Ticket Policy Section III F
Zane, Shirlee (1 parking)	2 tix	Ceremonial Role Conter
McGuire, Mike (1 parking)	2 tix	Ceremonial Role Other Income Income Income If checking "Ceremonial Role" or "Other" describe below: Ticket Policy Section III F
		Ceremonial Role Other I Income I Income I Income I Income II Income III Income II Income II Income II Inco
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