

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

A Public Document

<b>1. Agency Name</b> County of Sonoma <hr/> Division, Department, or Region <i>(If Applicable)</i> County Administrator's Office <hr/> Designated Agency Contact <i>(Name, Title)</i> 575 Administration Drive, Santa Rosa, CA 95403 <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:25%; border: none;">Area Code/Phone Number</td> <td style="border: none;">E-mail</td> </tr> <tr> <td style="border: none;">707-565-2241</td> <td style="border: none;">roxanne.epstein@sonoma-county.org</td> </tr> </table>		Area Code/Phone Number	E-mail	707-565-2241	roxanne.epstein@sonoma-county.org	Date Stamp      <input type="checkbox"/> Amendment <i>(Must provide explanation in Part 3.)</i>  Date of Original Filing: _____ <i>(Month, Day, Year)</i>	<b>California Form 802</b> For Official Use Only
Area Code/Phone Number	E-mail						
707-565-2241	roxanne.epstein@sonoma-county.org						

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes     No     Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 200.00

Event Description Red & White Ball    Date(s) 8 / 29 / 15    \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

*Provide Title/Explanation*

Ticket(s)/Pass(es) provided by agency?    Yes     No     If no: Sonoma Valley Education Foundation

*Name of Source*

Was ticket distribution made at the behest of agency official?    No     Yes     If yes: \_\_\_\_\_

*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
Board of Supervisors Office	2	Ticket Policy III F
B. Name of Individual <small>(Last, First)</small>	Number of Ticket(s)/Pass(es)	Identify one of the following:
Gilardi, Pat	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i> Ticket Policy III F
	2	Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
C. Name of Outside Organization <small>(include address and description)</small>	Number of Ticket(s)/Pass(es)	Describe the public purpose made pursuant to the agency's policy

**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.*

<u>Roxanne Epstein</u>	Roxanne Epstein	County Ticket Administrator	8/31/2015
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(Month, Day, Year)</small>

<http://www.svgreatschools.org/red--white-ball.html>

Comment: \_\_\_\_\_