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

1.	Agency Name		Date Stamp	California 802			
	University of California, Davi	is		Form OOZ			
	Division, Department, or Regi	on (If Applicable		For Official Use Only			
	Robert and Margrit Mondavi		e Performing	Arts			
	Jessica Turner Area Code/Phone Number	E-mail			☐ Amendment (Must provide explanation in Part 3.)		
	530-754-4434	jlturner@ucd	lavie odu		Date of Original Filing:	01/28/2017	
_			iavis.euu			(Month, Day, Year)	
2.	Function or Event Inform			T Face Value o	of Each Ticket/Pass \$125.00		
	Does the agency have a ticker		Yes 🛛 No l	_			
	Event Description Itzhak Perl	man Provide Title/Expl	anation	Date(s)01	1417	01 , 14 , 17	
		·	ariatiOri				
	Ticket(s)/Pass(es) provided by	y agency?	Yes ⊠ No ☐ If no:		Name of Source		
	Was ticket distribution made a	t the behest	No □ Yes I	XI If yes. Roth,	Don, Executive Direct	ctor	
	of agency official?		110 🗀 1001	A 11 yos	Official's Name	(Last, First)	
3.	Recipients						
	Use Section A to identify the agency	y's department or	unit. • Use Sec	tlon B to identify an individu	ual. • Use Section C to ider	ntlfy an outside organization.	
A. Name of Agency, Department or Unit			Number of Ticket(s)/ Pass(es) Describe the put		blic purpose made pursuant to the agency's policy		
	Mondavi Center Staff		7	Recognize UC employees for their work			
	Name of Individua (Last, First)	al	Number of Ticket(s)/ Pass(es)	00.0	Identify one of the follow Other Identify one of the follow:	Income	
				Ceremonial Role If checking "Ceremon	Other Initial Role" or "Other" describe below:	Income 🗆	
C. Name of Outside Organization (Include address and description)		Number of Ticket(s)/ Pass(es)	Describe the pub	olic purpose made pursuan	nt to the agency's policy		
					c		
4.	Verification I have read and understand FPPC Regu		Don Ro	th	Executive Director	01/14/2017	
	Signature of Agency Head or Designee		Print Nam	e	Tille	(Month, Day, Year)	
	Comment: Up to 2 tickets pe	er employee					

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

I. Agency Name			Date Stamp	California Ono
University of California, Davis		Form 8UZ		
Division, Department, or Region (If Applie	-	For Official Use Only		
ADDITION OF THE CHARLES WE SHOULD SEE THE CHARLES OF THE CHARLES O				
Robert and Margrit Mondavi Center fo	r the Performing	g Arts		
Designated Agency Contact (Name, Title)				
Jessica Turner		Amendment (Must pr	rovide explanation in Part 3.)	
Area Code/Phone Number E-mail			Date of Original Filing:	01/28/2017
	ucdavis.edu		Date of Original Filling.	(Month, Day, Year)
2. Function or Event Information		75.00		
Does the agency have a ticket policy?	Yes 🛛 No	_	of Each Ticket/Pass \$	-
Event Description Curtis Chamber Orch	nestra Explanation	Date(s)01	21 , 17	01 , 21 , 17
Ticket(s)/Pass(es) provided by agency?	Yes⊠ No	☐ If no:	Name of Soi	urce
Was ticket distribution made at the behe	et N 🗖 V	Roth		
of agency official?	st No ☐ Yes	If yes:	Don, Executive Direct Official's Name (L	Last, First)
 Recipients Use Section A to identify the agency's department 	nt or unit. • Use Sec	ction B to identify an individ	ual. • Use Section C to ident	tify an outside organization.
A. Name of Agency, Department or Unit	Number of Ticket(s)/ Pass(es)		olic purpose made pursuant	
Mondavi Center Staff	12	Recognize UC employees for their work		
B. Name of Individual (Last, First)	Number of Ticket(s)/ Pass(es)	Ceremonial Role If checking "Ceremon	Identify one of the following of the fol	ing:
X 		Ceremonial Role If checking "Ceremon	Other Inial Role" or "Other" describe below:	Income
Name of Outside Organization (Include address and description)	Number of Ticket(s)/ Pass(es)	Describe the put	blic purpose made pursuant	to the agency's policy
I. Verification I have read and understand FPPC Regulations 18944.	1 and 18942. I have ve	erified that the distribution set	forth above, is in accordance wi	ith the requirements.
/ / /	Don Ro	oth	Executive Director	01/28/2017
Signature of Agency Head or Designee	Print Nan	ne	Title	(Month, Day, Year)
Comments Up to 2 tickets per employe	20			
Comment: Op to 2 tickets per employe				EDDO F 000 (4/40

Agency Report of:

Ceremonial Role Events and Ticket/Pass Distributions

California Date Stamp		STOTITOTILATINO EVOIT	LO GITTA TTO				A i abilo bocament	
Drivision, Department, or Region (if Applicable) Robert and Margist Mondavi Center for the Performing Arts	1.	Agency Name		Date Stamp				
Robert and Margrit Mondavi Center for the Performing Arts Designated Agency Contact (Name, Title)		University of California, Dav	is					
Designated Agency Contact (Name, Title) Jessica Turner Amendment (Nust provide explanation in Port 3.) Jessica Turner Date of Original Filling: 01/28/2017 Sto. 754-4434		Division, Department, or Regi	on (If Applicable]	For Official Ose Offix			
Jessica Turner					-			
Amendment (May provide expandance of a surprise of s								
2. Function or Event Information Does the agency have a ticket policy? Yes S No Face Value of Each Ticket/Pass \$ 75.00 Event Description Curtis Chamber Orchestra Event Description Curtis Chamber Orchestra Event Description Organization Ticket(s)/Pass(es) provided by agency? Yes No Face Value of Each Ticket/Pass \$ 75.00 Was ticket distribution made at the behest No Yes No Face Value of Each Ticket/Pass \$ 75.00 Was ticket distribution made at the behest No Face Value of Each Ticket/Pass(es) Was ticket distribution made at the behest No Face Value of Each Ticket/Pass(es) Was ticket distribution made at the behest No Face Value of Each Ticket/Pass(es) Was ticket distribution made at the behest No Face Value of Each Ticket/Pass(es) Was ticket distribution made at the behest No Face Value of Each Ticket/Pass(es) Was ticket distribution made at the behest No Face Value of Each Ticket/Pass(es) Was ticket distribution made at the behest No Face Value of Each Ticket/Pass(es) Was ticket distribution made at the behest No Face Value of Each Ticket/Pass(es) Recognize Roth, Don, Executive Director Official's Name of Source Was ticket distribution made at the behest No Face Value of Each Ticket/Pass(es) A. Name of Agency, Department or Unit Number of Ticket(s) Pass(es) Recognize volunteers for their work B. Name of Individual (act, Pas) Income Indexed Orber Orber Income			E mail	1 —				
2. Function or Event Information Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 75.00 Event Description Curtis Chamber Orchestra Date(s)						Date of Original Filing: 01/28/2017		
Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 75.00 Event Description Curtis Chamber Orchestra Date(s) 01 21 17 01 21 17 Date(s) D	_	L-				(Wonth, Day, Year)		
Event Description Curtis Chamber Orchestra Provide Title/Explanation Ticket(s)/Pass(es) provided by agency? Yes No Date(s) 01 21 17 01 21 17 Ticket(s)/Pass(es) provided by agency? Yes No Date(s) No Recupited Provide Title/Explanation Was ticket distribution made at the behest of agency official? Recipients Recipients A. Name of Agency, Department or Unit Number of Ticket(s)/Pass(es) Mondavi Center Volunteer Ushers 114 Recognize volunteers for their work B. Name of Individual (Leaf, Pred) Recognize volunteers for their work Recognize volunteers for their work Ceromocial Role Other Income Income Ceromocial Role or Other describe below: Ceromocial Role Other Income Income Income Income Ceromocial Role or Other describe below: Ceromocial Role Other Income Income Income Income Income Income Ceromocial Role or Other describe below: Ceromocial Role Other Income						of Each Ticket/Pass \$	75.00	
Ticket(s)/Pass(es) provided by agency? Yes S No If no: Name of Source Was ticket distribution made at the behest of agency official? 3. Recipients - Use Section A to identify the agency's department or unit. - Use Section B to Identify an Individual. - Use Section A to identify the agency's department or Unit. - Use Section B to Identify an Individual. - A. Name of Agency, Department or Unit. - Minimber of Ticket(et) Pass(es) - Mondavi Center Volunteer Ushers - 114 - Recognize volunteers for their work - Recognize volunteers for their volunteers for their work - Recognize volunteers for their volunteers for their work - Recognize volunteers for their		1 7 100 🛅 110						
Was ticket distribution made at the behest of agency official? No Yes Roth, Don, Executive Director Officials Name (Last, First)		Event Description Curtis Cha	Provide Title/Exp					
Was ticket distribution made at the behest of agency official? No Yes Roth, Don, Executive Director Officials Name (Last, First)		Ticket(s)/Pass(es) provided by agency? Yes			☐ If no:	Name of S	Name of Source	
A. Name of Agency, Department or Unit Number of Plass(es)		AA						
3. Recipients • Use Section A to Identify the agency's department or unit. • Use Section B to Identify an Individual. A. Name of Agency, Department or Unit Ticket(s)' Pass(as) Mondavi Center Volunteer Ushers 114 Recognize volunteers for their work B. Name of Individual (seat Field) Pass(as) Pass(as) Ceramonial Role Other Income			it the benest	No ∐ Yes	X If yes: 10011,	Official's Name	(Last, First)	
See Section A to Identify the agency's department or unit. See Section B to Identify an individual. See Section C to Identify an outside organization.	_							
A. Name of Agency, Department or Unit Number of Pass(es) Recognize volunteers for their work Pass(es) Recognize volunteers for their work Identify one of the following: Identify one of the following: Ceremonial Role Other Income I	3.	Recipients Lise Section A to identify the agence	v's denartment or	unit. • Use Sec	tion B to Identify an individ	ual. • Use Section C to ide	ntify an outside organization.	
Mondavi Center Volunteer Ushers 114 Recognize volunteers for their work Recognize volunteers for their work				Number of Ticket(s)/				
Same of Individual (Lest, Fired) Pass(es) Identify one of the following: Income Inc		Mondavi Center Volunteer Ushers			Recognize volunteers for their work			
4. Verification I have read and understand EPEC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements. Don Roth Executive Director Signature of Agency Head or Designee Print Name Title Up to 2 tickets per volunteer				Ticket(s)/	1	Other	Income	
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. Don Roth Executive Director Signature of Agency Head or Designee Print Name Title (Month, Day, Year) Comment: Up to 2 tickets per volunteer								
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. Don Roth Executive Director 01/28/2017		C. Name of Outside Organization (Include address and description)		Ticket(s)/	Describe the pul	blic purpose made pursua	nt to the agency's policy	
Don Roth Executive Director 01/28/2017 Signature of Agency Head or Designee Print Name Title (Month, Day, Year) Comment: Up to 2 tickets per volunteer	4.	Verification I have read artifunderstand FPPC Regulation	ulations 18944.1 ar	nd 18942. I have ve	erified that the distribution set	forth above, is in accordance (with the requirements.	
Signature of Agency Head or Designee Print Name Title (Month, Day, Year) Up to 2 tickets per volunteer		\mathcal{W}						
Comment		Signalure of Agency Head or Designee						
Comment		11 (0 0 1)	- = المنتامين سم					
		Comment: Up to 2 tickets p	er volunteer				EPPC Form 802 (4/12	

Agency Report of:

Ceremonial Role Events and Ticket/Pass Distributions

1.	Agency Name		Date Stamp California				
	University of California, Dav			Form For Official Use Only			
	Division, Department, or Regi	on (If Applicable		1 of Official Cae Office			
	Robert and Margrit Mondavi	Center for th					
	Designated Agency Contact (Name, Title)					
	Jessica Turner						
	Area Code/Phone Number E-mail				l –	orovide explanation in Part 3.)	
	530-754-4434	davis.edu		Date of Original Filing: 02/03/2017 (Month, Day, Year)			
2.	Function or Event Infor	mation				405.00	
	Does the agency have a ticket policy? Yes ⊠ N			☐ Face Value o	f Each Ticket/Pass \$ _	125.00	
	Event Description PKF-Pragu	nia _{Ianation}	Date(s)01		01 , 28 , 17		
	Ticket(s)/Pass(es) provided by	Yes⊠ No	☐ If no:	Name of Source			
	Was ticket distribution made a	t the behest	No ☐ Yes		, Don, Executive Director		
	of agency official?			11 you	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			
•	Mondavi Center Staff		9	Recognize UC employees for their work			
	B. Name of Individual		Number of Ticket(s)/ Pass(es)	Ceremonial Role	Identify one of the follow	vlng:	
				Ceremonial Role	ial Role" or "Other" describe below: Other ial Role" or "Other" describe below:	Income	
	C. Name of Outside Organ (Include address and des		Number of Ticket(s)/ Pass(es)	Describe the pub	illc purpose made pursuan	it to the agency's policy	
1	Verification						
	I have read and understand FPPC Regu	lations 18944 1 an	d 18942. I have ve	arified that the distribution set t	forth above, is in accordance w	ith the requirements.	
				oth	Executive Director	02/03/2017	
	Signature of Agency Head or Designee		Print Nam	le .	Title	(Month, Day, Year)	

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

_						To me the second	
1.	Agency Name		Date Stamp	California 802			
	University of California, Davis					For Official Use Only	
	Division, Department, or Reg	ion (If Applicable		T of State at Sec Stary			
	Robert and Margrit Mondavi	Center for th					
	Designated Agency Contact (1		
	Jessica Turner						
	Area Code/Phone Number	E-mail			provide explanation in Part 3.)		
	530-754-4434 jlturner@ucdavis.edu				Date of Original Filing:	(Month, Day, Year)	
2.	Function or Event Infor	mation	de-				
	Does the agency have a ticke		Yes⊠ No	☐ Face Value o	of Each Ticket/Pass \$ _	58.00	
	Event Description Les Ballet	Trockadero		1 , 29 , 17	01 , 29 , 17		
	Event Description	Provide Title/Exp	lanation	Date(s)			
	Ticket(s)/Pass(es) provided b	v agency?	Yes⊠ No	□ If no:	Name of So		
	Tionol(o)/T doo(oo) provided b	y agonoy.	IES 🔼 INU				
	Was ticket distribution made a	at the behest	No 🗋 Yes	✓ If yes: Roth,	, Don, Executive Direc	otor (1.50)	
	of agency official?				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 put	Describe the public purpose made pursuant to the agency's policy		
	Mondavi Center Staff		30	Recognize UC employees for their work			
	B. Name of Individual (Last, First)		Number of Ticket(s)/ Pass(es)	Ceremonial Role If checking "Ceremon	Identify one of the follow Other nial Role" or "Other" describe below:	Income 🗌	
				Ceremonial Role If checking "Ceremon	Other Inial Role" or "Other" describe below:	Income 🗖	
	Name of Outside Organization (Include address and description)		Number of Ticket(s)/ Pass(es)	Describe the pul	blic purpose made pursuan	nt to the agency's policy	
4.	Verification I have read and understand FPPC Regu	ulations 18944.1 an	d 18942. I have ve	erified that the distribution set	forth above, is in accordance w	vith the requirements.	
	M		Don Roth		Executive Director	02/03/2017	
	Signature of Agency Head or Designee		Print Nan		Title	(Month, Day, Year)	
	8						
	Comment: Up to 2 tickets per employee						
						EPPG FORM 8112 (4/12	