

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

**A Public Document**

|   |  |   |   |
|---|--|---|---|
| <b>1. Agency Name</b><br>University of California, Davis  |  | Date Stamp  | <b>California Form 802</b><br>For Official Use Only |
| <b>Division, Department, or Region (If Applicable)</b><br>Robert and Margrit Mondavi Center for the Performing Arts |  |   |   |
| <b>Designated Agency Contact (Name, Title)</b><br>Sarah Herrera   |  | <input type="checkbox"/> <b>Amendment</b> (Must provide explanation in Part 3.)<br><b>Date of Original Filing:</b> <u>10/03/2015</u><br><small>(Month, Day, Year)</small> |   |
| <b>Area Code/Phone Number</b><br>530-754-4435   | <b>E-mail</b><br>smherrera@ucdavis.edu |   |   |

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes     No     Face Value of Each Ticket/Pass \$ 40.00

Event Description Steven Wright    Date(s) 9 / 18 / 15    9 / 18 / 15  
Provide Title/Explanation


Ticket(s)/Pass(es) provided by agency?    Yes     No     If no: \_\_\_\_\_  
Name of Source

Was ticket distribution made at the behest of agency official?    No     Yes     If yes: Roth, Don, Executive Director  
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  | 15                            | Recognize UC employees for their work  |
|   |                               |  |
| B. Name of Individual<br><small>(Last, First)</small>                               | Number of Ticket(s)/ Pass(es) | Identify one of the following:   |
|   |                               | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/><br><small>If checking "Ceremonial Role" or "Other" describe below:</small> |
|   |                               | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/><br><small>If checking "Ceremonial Role" or "Other" describe below:</small> |
|   |                               |  |
| C. Name of Outside Organization<br><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.*

|   |            |                    |                    |
|---|------------|--------------------|--------------------|
|  | Don Roth   | Executive Director | 10/03/2015         |
| Signature of Agency Head or Designee  | Print Name | Title              | (Month, Day, Year) |

Comment: Up to 2 tickets per employee

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| <b>1. Agency Name</b><br>University of California, Davis  |  | Date Stamp   | <div style="background-color: black; color: white; padding: 5px; font-weight: bold; font-size: 1.2em;">California Form 802</div> For Official Use Only |
| <b>Division, Department, or Region</b> (If Applicable)<br>Robert and Margrit Mondavi Center for the Performing Arts |  |  |  |
| <b>Designated Agency Contact</b> (Name, Title)<br>Sarah Herrera   |  |  |  |
| <b>Area Code/Phone Number</b><br>530-754-4435   | <b>E-mail</b><br>smherrera@ucdavis.edu | <input type="checkbox"/> <b>Amendment</b> (Must provide explanation in Part 3.)<br><b>Date of Original Filing:</b> 10/03/2015<br><small>(Month, Day, Year)</small> |  |

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes     No       Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 40.00

Event Description Steven Wright      Date(s) 9 / 18 / 15      9 / 18 / 15  
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency?    Yes     No       If no: \_\_\_\_\_  
Name of Source

Was ticket distribution made at the behest of agency official?    No     Yes       If yes: Roth, Don, Executive Director  
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  | 15                           | Recognize UC employees for their work  |
|   |                              |  |
| B. Name of Individual<br><small>(Last, First)</small>                               | Number of Ticket(s)/Pass(es) | Identify one of the following:   |
|   |                              | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/><br><small>If checking "Ceremonial Role" or "Other" describe below:</small> |
|   |                              | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/><br><small>If checking "Ceremonial Role" or "Other" describe below:</small> |
|   |                              |  |
| C. Name of Outside Organization<br><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.*

|   |                           |                      |                                   |
|---|---------------------------|----------------------|-----------------------------------|
|   | Don Roth                  | Executive Director   | 10/03/2015                        |
| <small>Signature of Agency Head or Designee</small> | <small>Print Name</small> | <small>Title</small> | <small>(Month, Day, Year)</small> |

Comment: Up to 2 tickets per employee

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| University of California, Davis                               |                       |   |  |
| <b>Division, Department, or Region</b> <i>(If Applicable)</i> |                       |   |  |
| Robert and Margrit Mondavi Center for the Performing Arts     |                       |   |  |
| <b>Designated Agency Contact</b> <i>(Name, Title)</i>         |                       |   |  |
| Sarah Herrera   |                       |   |  |
| <b>Area Code/Phone Number</b>                                 | <b>E-mail</b>         | <input type="checkbox"/> <b>Amendment</b> <i>(Must provide explanation in Part 3.)</i>        |  |
| 530-754-4435  | smherrera@ucdavis.edu | <b>Date of Original Filing:</b> <u>10/03/2015</u><br><small><i>(Month, Day, Year)</i></small> |  |

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes     No       Face Value of Each Ticket/Pass \$ 75.00

Event Description Jazz at Lincoln Center      Date(s) 9 / 21 / 15      9 / 21 / 15  
*Provide Title/Explanation*

Ticket(s)/Pass(es) provided by agency?    Yes     No       If no: \_\_\_\_\_  
*Name of Source*

Was ticket distribution made at the behest of agency official?    No     Yes       If yes: Roth, Don, Executive Director  
*Official's Name (Last, First)*

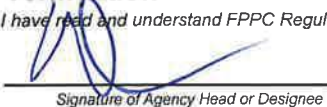
**3. Recipients**

• 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  | 18                            | Recognize UC employees for their work   |
|   |                               |   |
| B. Name of Individual <small><i>(Last, First)</i></small>                               | Number of Ticket(s)/ Pass(es) | Identify one of the following:  |
|   |                               | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/><br><small><i>If checking "Ceremonial Role" or "Other" describe below:</i></small> |
|   |                               | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/><br><small><i>If checking "Ceremonial Role" or "Other" describe below:</i></small> |
|   |                               |   |
| C. Name of Outside Organization <small><i>(include address and description)</i></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.*

|   |                                  |                             |  |
|---|----------------------------------|-----------------------------|--|
|  | Don Roth                         | Executive Director          | 10/03/2015                               |
| <small><i>Signature of Agency Head or Designee</i></small>                          | <small><i>Print Name</i></small> | <small><i>Title</i></small> | <small><i>(Month, Day, Year)</i></small> |

Comment: Up to 2 tickets per employee

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| University of California, Davis                           |                       |   | For Official Use Only      |
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| Robert and Margrit Mondavi Center for the Performing Arts |                       |   |                            |
| <b>Designated Agency Contact (Name, Title)</b>            |                       |   |                            |
| Sarah Herrera   |                       |   |                            |
| <b>Area Code/Phone Number</b>                             | <b>E-mail</b>         | <input type="checkbox"/> <b>Amendment</b> (Must provide explanation in Part 3.) |                            |
| 530-754-4435  | smherrera@ucdavis.edu | <b>Date of Original Filing:</b> 10/03/2015<br><small>(Month, Day, Year)</small> |                            |

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes     No     Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 51.00

Event Description Mavis Staples and Joan Osborne    Date(s) 9 / 30 / 15    9 / 30 / 15  
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency?    Yes     No     If no: \_\_\_\_\_  
Name of Source

Was ticket distribution made at the behest of agency official?    No     Yes     If yes: Roth, Don, Executive Director  
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  | 7                            | Recognize UC employees for their work  |
|   |                              |  |
| B. Name of Individual<br><small>(Last, First)</small>                               | Number of Ticket(s)/Pass(es) | Identify one of the following:   |
|   |                              | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/><br><small>If checking "Ceremonial Role" or "Other" describe below:</small> |
|   |                              | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/><br><small>If checking "Ceremonial Role" or "Other" describe below:</small> |
|   |                              |  |
| C. Name of Outside Organization<br><small>(include address and description)</small> | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency's policy   |
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|   |                              |  |

**4. Verification**

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|                                      |            |                    |                    |
|--------------------------------------|------------|--------------------|--------------------|
|                                      | Don Roth   | Executive Director | 10/03/2015         |
| Signature of Agency Head or Designee | Print Name | Title              | (Month, Day, Year) |

Comment: Up to 2 tickets per employee