

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

A Public Document

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ _____ 50.00

Event Description YAC Package *Provide Title/Explanation* Date(s) 04 / 27 / 18 04 / 29 / 18

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)

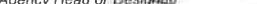
3. Recipients

- 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	1	Recognize UC employees for their work		
B. Name of Individual (Last, First)	Number of Ticket(s)/ Pass(es)	Identify one of the following:		
		Ceremonial Role <input type="checkbox"/>	Other <input type="checkbox"/>	Income <input type="checkbox"/>
		<i>If checking "Ceremonial Role" or "Other" describe below:</i>		
		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 (include address and description)	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** **06/04/2018**
Signature of Agency Head or Designee **Print Name** **Title** **(Month, Day, Year)**

Comment: Up to 2 tickets per employee

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

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1. Agency Name

University of California, Davis

Division, Department, or Region (If Applicable)

Robert and Margrit Mondavi Center for the Performing Arts

Designated Agency Contact (Name, Title)

Rebekah Laibson

Area Code/Phone Number

530-754-4434

E-mail

rilaibson@ucdavis.edu

Date Stamp

California Form 802

For Official Use Only

Amendment (Must provide explanation in Part 3.)

06/04/2018

Date of Original Filing: (Month, Day, Year)

2. Function or Event Information

Does the agency have a ticket policy? Yes No

Face Value of Each Ticket/Pass \$ 49.00

Event Description Terence Blanchard

Date(s) 04 / 20 / 18 04 / 20 / 18

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)

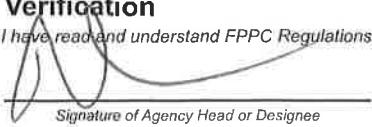
3. Recipients

• 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	6	Recognize UC employees for their work		
B. Name of Individual (Last, First)	Number of Ticket(s)/Pass(es)	Identify one of the following:		
		Ceremonial Role <input type="checkbox"/>	Other <input type="checkbox"/>	Income <input type="checkbox"/>
		If checking "Ceremonial Role" or "Other" describe below:		
		Ceremonial Role <input type="checkbox"/>	Other <input type="checkbox"/>	Income <input type="checkbox"/>
		If checking "Ceremonial Role" or "Other" describe below:		
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		

4. Verification

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Signature of Agency Head or Designee

Don Roth

Print Name

Executive Director

Title

06/04/2018

(Month, Day, Year)

Comment: Up to 2 tickets per employee

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2. Function or Event Information

Does the agency have a ticket policy?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Face Value of Each Ticket/Pass \$ _____	45.00
Event Description	JD Vance	Date(s)	04 / 11 / 18
	<i>Provide Title/Explanation</i>		04 / 11 / 18
Ticket(s)/Pass(es) provided by agency?		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	If no: _____ <i>Name of Source</i>
Was ticket distribution made at the behest of agency official?		No <input type="checkbox"/> Yes <input checked="" type="checkbox"/>	If yes: _____ <i>Official's Name (Last, First)</i>

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	11	Recognize UC employees for their work		
B. Name of Individual (Last, First)	Number of Ticket(s)/ Pass(es)	Identify one of the following:		
		Ceremonial Role <input type="checkbox"/>	Other <input type="checkbox"/>	Income <input type="checkbox"/>
		<i>If checking "Ceremonial Role" or "Other" describe below:</i>		
		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 (Include address and description)	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy		

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[Signature]
Signature of Agency Head or Designee

Don Roth

Print Name

Executive Director

Title

06/04/2018

(Month, Day, Year)

Comment: Up to 2 tickets per employee

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

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1. Agency Name		Date Stamp	California Form 802
University of California, Davis		For Official Use Only	
Division, Department, or Region (If Applicable)			
Robert and Margrit Mondavi Center for the Performing Arts			
Designated Agency Contact (Name, Title)			
Rebekah Laibson			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
530-754-4434	rilaibson@ucdavis.edu	Date of Original Filing: <u>06/04/2018</u> (Month, Day, Year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes No

Event Description The O'Connor Band
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No

Was ticket distribution made at the behest of agency official? No Yes

Face Value of Each Ticket/Pass \$ 49.00

Date(s) 04 / 13 / 18 04 / 13 / 18

If no: _____

Name of Source

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	24	Recognize UC employees for their work		
B. Name of Individual (Last, First)	Number of Ticket(s)/Pass(es)	Identify one of the following:		
		Ceremonial Role <input type="checkbox"/>	Other <input type="checkbox"/>	Income <input type="checkbox"/>
		<small>If checking "Ceremonial Role" or "Other" describe below:</small>		
		Ceremonial Role <input type="checkbox"/>	Other <input type="checkbox"/>	Income <input type="checkbox"/>
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Signature of Agency Head or Designee

Don Roth

Print Name

Executive Director

Title

06/04/2018

(Month, Day, Year)

Comment: Up to 2 tickets per employee

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1. Agency Name University of California, Davis		Date Stamp	California Form 802
Division, Department, or Region (If Applicable) Robert and Margrit Mondavi Center for the Performing Arts			For Official Use Only
Designated Agency Contact (Name, Title) Rebekah Laibson		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
Area Code/Phone Number 530-754-4434	E-mail rilaibson@ucdavis.edu	Date of Original Filing: <u>06/04/2018</u> (Month, Day, Year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 30.00

Event Description Merima Kljucic & Miroslav Tadic
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	3	Recognize UC employees for their work		
B. Name of Individual (Last, First)	Number of Ticket(s)/Pass(es)	Identify one of the following:		
		Ceremonial Role <input type="checkbox"/>	Other <input type="checkbox"/>	Income <input type="checkbox"/>
		If checking "Ceremonial Role" or "Other" describe below:		
		Ceremonial Role <input type="checkbox"/>	Other <input type="checkbox"/>	Income <input type="checkbox"/>
		If checking "Ceremonial Role" or "Other" describe below:		
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Signature of Agency Head or Designee

Don Roth

Print Name

Executive Director

Title

06/04/2018

(Month, Day, Year)

Comment: Up to 2 tickets per employee