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

1.	Agency Name				Date Stamp	California Q02
	University of California, Davis					Form OUZ
	Division, Department, or Regi	on (If Applicable		For Official Use Only		
	Robert and Margrit Mondavi	Center for th	e Performing	n Arts		
	Designated Agency Contact (9 - 1110		
	Jessica Turner					
	Area Code/Phone Number	E-mail			Amendment (Must pr	rovide explanation in Part 3.)
	530-754-4434	jlturner@uc	davis edu		Date of Original Filing: _	12/03/2016
_	Function or Event Inform				0 0,0	(Month, Day, Year)
	Does the agency have a ticket		Van 🔽 Na	□ Face Value o	f Each Ticket/Pass \$	125.00
	- •		Yes 🛛 No			
	Event Description China Philharmonic Orchestra Date(s) —				, 03 , 16	12 , 03 , 16
	Ticket(s)/Pass(es) provided by	agency?	Yes⊠ No	☐ If no:		
			_		Name of Sou	
	Was ticket distribution made a of agency official?	t the behest	No 🗌 Yes	If yes: Roth,	Don, Executive Direct	or ast First)
_						asi, i iisij
5.	Recipients • Use Section A to identify the agency	's denortment or	unit alleo Soo	ition 🛭 to identify an individu	iol - a Lloo Sootloo C to identi	if an autalda auraulautau
	•		Number of			
	A. Name of Agency, Department or Unit		Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy		
	Mondavi Center Volunteer Ushers		181	Recognize volunteers for their work		
	<u> </u>					
	Name of Individua		Number of Ticket(s)/ Pass(es)		Identify one of the following	ng:
					Other al Role" or "Other" describe below:	Income
5						
				Ceremonial Role If checking "Ceremonia	Other all Role" or "Other" describe below:	Income 📙
	C. Name of Outside Organi	zation	Number of	D		
	(include address and desc	ription)	Ticket(s)/ Pass(es)	Describe the publ	ic purpose made pursuant (to the agency's policy
3						
	Verification have read and understand FPPC Regula	itions 1804/ 1 and	118942 have ver	diffed that the distribution as to	orth about its in considerate	the requirements
ા	THE TEAU BITU WITGHT STATE REGULE	moris 10944,1 and	Don Ro		rth above, is in accordance with Executive Director	the requirements. 12/03/2016
,	Signature of Agency Head or Designee		Print Name		Title	(Month, Day, Year)
	Comment: Up to 2 tickets per	· volunteer				

Agency Report of:

Ceremonial Role Events and Ticket/Pass Distributions

١.,	Agency Name				Date Stamp California 202		
	University of California, Davis					Form OUZ	
	Division, Department, or Region	on (If Applicable	1	For Official Use Only			
	Robert and Margrit Mondavi	Center for th	ne Performing	a Arts			
	Designated Agency Contact (/			,	-		
	Jessica Turner						
		E-mail		provide explanation in Part 3.)			
	530-754-4434	jlturner@uc	davis edu		Date of Original Filing:	12/03/2016	
_	Function or Event Inform					(Month, Day, Year)	
	Does the agency have a ticket		□ Face Value o	of Each Ticket/Pass \$ _	125.00		
	· · · · · · · · · · · · · · · · · · ·					12 , 03 , 16	
	Event Description China Phili	Provide Title/Exp	lanation	Date(s)	2 , 03 , 16	12 / 03 / 10	
				☐ If no:	Gi-		
	Ticket(s)/Pass(es) provided by	agency:	Yes 🛛 No		Name of So		
	Was ticket distribution made at the behest No			If yes: Roth	Don, Executive Direct	ctor	
	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 public purpose made pursuant to the agency's policy			
	Mondavi Center Staff		19	Recognize UC employees for their work			
	B. Name of Individual		Number of Ticket(s)/ Pass(es)		Identify one of the follow	ving:	
	· C		, 433(63)	Ceremonial Role If checking "Ceremon	Other Inial Role" or "Other" describe below:	Income	
				Ceremonial Role		Income _	
				іг спескіпд "Сегетоі	nial Role" or "Other" describe below:		
	Name of Outside Organi (include address and desc		Number of Ticket(s)/ Pass(es)		nial Role" or "Other" describe below:		
			Ticket(s)/				
		ription)	Ticket(s)/ Pass(es)	Describe the pul	olic purpose made pursuan	t to the agency's policy	
	Verification	ription)	Ticket(s)/ Pass(es)	Describe the pul	olic purpose made pursuan	t to the agency's policy	

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

f.	Agency Name			Date Stamp	California 802		
	University of California, Davis				Form OOZ		
	Division, Department, or Region (If Applicab		For Official Use Only				
	Robert and Margrit Mondavi Center for the	ne Performino	ı Arts				
	Designated Agency Contact (Name, Title)		,				
	Jessica Turner			Amendment (Must	provide explanation in Part 3.)		
	Area Code/Phone Number E-mail				12/21/2016		
	530-754-4434 jlturner@uc	davis.edu		Date of Original Filing:	(Month, Day, Year)		
2.	Function or Event Information				51.00		
	Does the agency have a ticket policy?	Yes 🛛 No		f Each Ticket/Pass \$ _			
	Event Description American Bach Soloist Provide Title/Ex,	Solanation	Date(s)12	. , 10 , 16	12 , 10 , 16		
	Ticket(s)/Pass(es) provided by agency?	Yes ⊠ No	☐ If no:	Name of S	ource		
	Was ticket distribution made at the behest	No ☐ Yes	⊠ If ves. Roth,	Don, Executive Direct	otor		
	of agency official?	110 🖂 100		Official's Name	(Last, First)		
3.	Recipients						
	• Use Section A to identify the agency's department o		ction B to identify an individu	ual. • Use Section C to ide	ntify an outside organization.		
	A. Name of Agency, Department or Unit	Number of Ticket(s)/ Pass(es)	Describe the pub	Describe the public purpose made pursuant to the agency's policy			
	Mondavi Center Volunteer Ushers	175	Recognize volunteers for their work				
	B. Name of Individual	Number of Ticket(s)/ Pass(es)		Identify one of the follow	Income		
			Ceremonial Role If checking "Ceremon	Other Inial 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 pursuar	nt to the agency's policy		
4.	Verification						
+.	I have read and understand FPPC Regulations 18944.1 a	nd 18942. I have ve	erified that the distribution set	forth above, is in accordance t	with the requirements.		
	Dr.	Don Ro	oth	Executive Director	12/21/2016		
	Signature of Agency Head or Designee Up to 2 tickets per volunteer	Print Nan	ne	Title	(Month, Day, Year)		
	Comment: Op to 2 tickets per volunteer						

Agency Report of:

Ceremonial Role Events and Ticket/Pass Distributions

1.	Agency Name				Date Stamp	California 802
	University of California, Dav Division, Department, or Regi			For Official Use Only		
	2.00					
	Robert and Margrit Mondavi		e Performing	y Arts		
	Designated Agency Contact (Name, Litte)				
	Jessica Turner				Amendment (Must)	provide explanation in Part 3.)
	Area Code/Phone Number	E-mail	davia adu		Date of Original Filing:	12/21/2016
_	530-754-4434	jlturner@uc	uavis.euu			(Month, Day, Year)
2.	Function or Event Information Does the agency have a ticket policy? Yes ☒ No ☐ Face Value				of Each Ticket/Pass \$ _	51.00
			Yes⊠ Nol	_		
	Event Description Amercian	Provide Title/Exp	lanation		. 10 , 16	
	Ticket(s)/Pass(es) provided by	y agency?	Yes⊠ No	☐ If no:	Name of So	purce
	Was ticket distribution made a	it the behest	No ☐ Yes		Don, Executive Direct	otor
	of agency official?		110 🗀 1001	м п усэ. <u>——</u>	Official's Name	(Last, First)
3.	Recipients					
	Use Section A to identify the agency	y's department or		tion B to Identify an individu	ual. • Use Section C to ider	ntify an outside organization.
	A. Name of Agency, Departme	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		
			Number of			
	Name of Individua (Last, First)	Ticket(s)/ Pass(es)	Identify one of the following:			
				Ceremonial Role If checking "Ceremon	Other Initial Role" or "Other" describe below:	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 pursuar	nt to the agency's policy
					-	
4.		1.11 400 11 1	1 400 40 11		fouth above in in an analysis	with the requirements
	I have read and understand FPPC Regulations 18944.1 and 18942. I hav				forth above, is in accordance we Executive Director	with the requirements.
	Signature of Agency Head or Designee Print Name			ne .	Title	(Month, Day, Year)
	Opening the Up to 2 tickets pe	er employee				

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

1.	Agency Name				Date Stamp	California 802
	University of California, Dav Division, Department, or Regi			For Official Use Only		
	Robert and Margrit Mondavi	Center for th				
	Designated Agency Contact (Name, Title)				
	Jessica Turner		Amondment (Must	provide explanation in Part 3.)		
	Area Code/Phone Number	E-mail			1 —	
	530-754-4434	jlturner@uc	davis.edu		Date of Original Filing	(Month, Day, Year)
2.	Function or Event Infor	mation		79.00		
	Does the agency have a ticket policy? Yes ☒ No [_	of Each Ticket/Pass \$_	
	Event Description Chamber S	Society of Lin			. , 11 , 16	
	Ticket(s)/Pass(es) provided by agency? Yes ⊠			☐ If no:	Name of S	Cource
					Don, Executive Dire	
	Was ticket distribution made a of agency official?	No ☐ Yes	If yes: 11000	Official's Name	(Last, First)	
2	Recipients					
٠.	Use Section A to Identify the agency	y's department or	unit. • Use Sec	tion B to identify an individu	ual. • Use Section C to ide	ntify 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		17	Recognize UC employees for their work		
	B. Name of Individual		Number of Ticket(s)/		Identify one of the follow	wing:
	(Last, First)		Pass(es)			
					Other Initial Role" or "Other" describe below	Income L
				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 put	olic purpose made pursua	nt to the agency's policy
4.	Verification					
	I have read and understand FPPC Regulations 18944.1 and 18942. I have				forth above, is in accordance Executive Director	
	Signature of Agency Head or Designee)	Print Nam		Title	(Month, Day, Year)
	Up to 2 tickets po	er employee				

Agency Report of:

Ceremonial Role Events and Ticket/Pass Distributions

	Agency Name				Date Stamp California Form	
	University of California, Davi			For Official Use Only		
1	Division, Department, or Regi	on (If Applicabl				
	Robert and Margrit Mondavi					
	Designated Agency Contact (vame, ritie)				
- 5	Jessica Turner				Amendment (Must)	provide explanation in Part 3.)
	Area Code/Phone Number 530-754-4434	E-mail	davia odu		Date of Original Filing:	12/21/2016
_	Function or Event Inforr	jlturner@uc	uavis.euu			(Month, Day, Year)
	Does the agency have a ticket		V [7] N-1	□ Face Value o	of Each Ticket/Pass \$_	79.00
	- •	-	Yes 🛛 No	_		
6	Event Description Ukulele Or	Provide Title/Exp	planation	Date(s)	2 , 13 , 16	12
-	Ticket(s)/Pass(es) provided by	agency?	Yes 🗵 No l	☐ If no:	Name of So	NUMBER OF THE PROPERTY OF THE
,	المحدد مددنا المنافعة المن	t the bebeet		Roth		
1	Was ticket distribution made a of agency official?	i ine benest	No ☐ Yes	⊠ If yes:	Don, Executive Direction Official's Name ((Last, First)
_	Recipients					
	 Use Section A to identify the agency 	's department or	runit. • Use Sec	tion B to identify an individ	ual. • Use Section C to ider	ntify 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		29	Recognize UC employees for their work		
	Name of Individual		Number of Ticket(s)/ Pass(es)		Identify one of the follow	ring:
*				Ceremonial Role If checking "Ceremon	Other inial Role" or "Other" describe below:	Income 🗌
383				Ceremonial Role If checking "Ceremon	Other Inial Role" or "Other" describe below:	Income
(C. Name of Outside Organization (Include address and description)		Number of Ticket(s)/ Pass(es)	Describe the put	olic purpose made pursuan	t to the agency's policy
	Ver sication		*	W		W
I	have read and understand FPPC Regul	ations 18944.1 an	d 18942, I have ve Don Ro		forth above, is in accordance w Executive Director	ith the requirements.
	Signature of Agency Head or Designee Print Name					