

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

A Public Document

| | | | |
|---|--|--|--|
| 1. Agency Name University of California, Davis | | Date Stamp | California Form 802 <small>For Official Use Only</small> |
| Division, Department, or Region (If Applicable) Robert and Margrit Mondavi Center for the Performing Arts | | | |
| Designated Agency Contact (Name, Title) Rebekah Laibson | | <input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: <u>1/19/2018</u> <small>(Month, Day, Year)</small> | |
| Area Code/Phone Number 530-754-4434 | E-mail rilaibson@ucdavis.edu | | |

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 76.00

Event Description Brandi Carlile Date(s) 12 / 16 / 17 12 / 16 / 17
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 <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"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> |
| | | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> |
| | | |
| 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.

| | | | |
|--|--|---|---|
|  <small>Signature of Agency Head or Designee</small> | <u>Don Roth</u> <small>Print Name</small> | <u>Executive Director</u> <small>Title</small> | <u>1/19/2018</u> <small>(Month, Day, Year)</small> |
|--|--|---|---|

Comment: Up to 2 tickets per employee

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2. Function or Event Information

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

Event Description American Bach Soloist Date(s) 12 / 17 / 17 12 / 17 / 17
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 | 2 | 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"/> <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"/> <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 |
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|  | Don Roth | Executive Director | 1/19/2018 |
| <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> |

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| Rebekah Laibson | | | |
| Area Code/Phone Number | E-mail | <input type="checkbox"/> Amendment <i>(Must provide explanation in Part 3.)</i> | |
| 530-754-4434 | rlaibson@ucdavis.edu | Date of Original Filing: <u>1/19/2018</u> <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 \$ 49.00

Event Description Mark Wood Experience Date(s) 12 / 15 / 17 12 / 15 / 17
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)

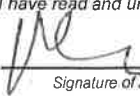
3. Recipients

• 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 | 12 | 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"/> <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"/> <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 |
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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 1/19/2018
Signature of Agency Head or Designee *Print Name* *Title* *(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 No Face Value of Each Ticket/Pass \$ _____ 45.00

Event Description The Hot Sardines Date(s) 12 / 08 / 17 12 / 08 / 17
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)

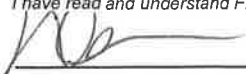
3. Recipients

• 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 | 17 | Recognize UC employees for their work |
| | | |
| B. Name of Individual <i>(Last, First)</i> | 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> |
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| Area Code/Phone Number 530-754-4434 | E-mail rilaibson@ucdavis.edu | | |

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 65.00

Event Description ASQ Date(s) 12 / 03 / 17 12 / 03 / 17
Provide Title/Explanation

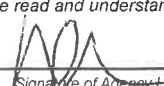
Ticket(s)/Pass(es) provided by agency? Yes No If no: _____
Name of Source

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

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| 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 <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"/> <small><i>If checking "Ceremonial Role" or "Other" describe below:</i></small> |
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Comment: Up to 2 tickets per employee