

**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			
Area Code/Phone Number 530-754-4448	E-mail rilaibson@ucdavis.edu	<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: <u>3/13/2018</u> <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 \$ 75.00

Event Description Compania Nacional de Danza Date(s) 3 / 3 / 18 3 / 4 / 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 Employees	67	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>3/13/2018</u> <small>(Month, Day, Year)</small>
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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 \$ 125.00

Event Description Academy of St Martin Date(s) 3 / 12 / 18 3 / 12 / 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

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B. Name of Individual <small>(Last, First)</small>	Number of Ticket(s)/Pass(es)	Identify one of the following:
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