

**Tickets Provided by Agency Report**

**A Public Document**

TICKETS PROVIDED BY AGENCY REPORT

<b>1. Agency Name</b>		Date Stamp	<b>California Form 802</b> For Official Use Only
Monterey County Fair			
Division, Department, or Region (if applicable) 7th D.A.A.			
Street Address 2004 Fairground Rd., CA 93940			
Area Code/Phone Number 831-372-5863	E-mail Lisa@montereycountyfair.com	<input type="checkbox"/> Amendment (Must explain in Part 5.)	
Agency Contact (name and title) Lisa Sgheiza		Date of Original Filing: _____ (month, day, year)	

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 9 / 1 / 10 Description of Event: County Fair  
9 / 6 / 10 Face Value of Ticket: \$ 8.00

Agency Event  Yes  No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: n/a

Number of Tickets Received: 30 Ticket(s) Provided to Agency:  Gratuitously  Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Devine Frank	30	Board members distribute tickets to Potential Sponsors
Boyles Courtney	30	Board members distribute tickets to Potential Sponsors
Williams Kirk	30	Board members distribute tickets to Potential Sponsors

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: \_\_\_\_\_

Name of Individual or Organization: \_\_\_\_\_ Number of Tickets: \_\_\_\_\_

Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
 \_\_\_\_\_

**5. Verification**

*I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.*

\_\_\_\_\_  
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)  
 \_\_\_\_\_

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831-372-5863	Lisa@montereycountyfair.com		
Agency Contact (name and title)			
Lisa Sgheiza			

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Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Deberry Billy	30	Board members distribute tickets to Potential Sponsors
Varea-Hammond Sonya	30	Board members distribute tickets to Potential Sponsors
Cuda Mali	30	Board members distribute tickets to Potential Sponsors

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: \_\_\_\_\_

Name of Individual or Organization: \_\_\_\_\_ Number of Tickets: \_\_\_\_\_

Description of Organization: \_\_\_\_\_

Address of Organization: \_\_\_\_\_  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
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Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Peterson Dave	30	Board members distribute tickets to Potential Sponsors
Tarp Alan	30	Board members distribute tickets to Potential Sponsors
Borchard Andrea	30	Board members distribute tickets to Potential Sponsors

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

Name of Behesting Agency Official: \_\_\_\_\_  
 Name of Individual or Organization: \_\_\_\_\_ Number of Tickets: \_\_\_\_\_  
 Description of Organization: \_\_\_\_\_  
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Number and Street City State Zip Code  
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