

**Tickets Provided by Agency Report**

**A Public Document**

TICKETS PROVIDED BY AGENCY REPORT

<b>1. Agency Name</b> COUNTY OF ALAMEDA		Date Stamp	<b>California Form 802</b> <small>For Official Use Only</small>
Division, Department, or Region <i>(if applicable)</i> 1221 OAK STREET, #555			
Street Address OAKLAND, CA 94612			
Area Code/Phone Number 510-272-3882	E-mail crystal.hishida@acgov.org	<input type="checkbox"/> <b>Amendment</b> <i>(Must explain in Part 5.)</i> Date of Original Filing: _____ <small>(month, day, year)</small>	
Agency Contact <i>(name and title)</i> Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 10 / 22 / 10 Description of Event: Shakira  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 113.75

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 2 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 <small>(Last, First)</small>	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Ahad, Rozan	2	rewarding county employee for exemplary service

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

Name of Behesting Agency Official: Supervisor Gail Steele, District 2

Name of Individual or Organization: \_\_\_\_\_ Number of Tickets: 2


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.*

	CRYSTAL HISHIDA GRAFF	PRINCIPAL ANALYST	<u>10/22/10</u>
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(month, day, year)</small>

Comment: (Use this space or an attachment for any additional information including amendment explanation.)  
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Area Code/Phone Number (510) 272-3882	E-mail crystal.hishida@acgov.org	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	
Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 12 / 14 / 10 Description of Event: Golden State Warriors Game  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 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

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

Name of Behesting Agency Official: Supervisor Alice Lai-Bitker, District 3  
 Name of Individual or Organization: City of San Leandro Rec and Human Services Number of Tickets: 4  
 Description of Organization: Recreation and Human Services is dedicated to promoting community through its programs  
 Address of Organization: 15301 Wicks Blvd., San Leandro, CA 94579  
Number and Street City State Zip Code  
 Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a school or nonprofit organization for its contributions to the community

**5. Verification**

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

	CRYSTAL HISHIDA GRAFF	PRINCIPAL ANALYST	<u>10/31</u>
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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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 10 / 17 / 10 Description of Event: Disney on Ice Show  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 25.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 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

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4  
 Name of Individual or Organization: Katie, Andy, Adrian and Andre Kong Number of Tickets: 4  
 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.)  
To promote attendance at an event held at a County facility in order to maximize potential County revenue from parking

**5. Verification**

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

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 10/21/10  
 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.)  
and concession sales



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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 10 / 15 / 10 Description of Event: Disney on Ice Show  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 25.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 8 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

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: United Seniors of Oakland & Alameda County Number of Tickets: 8

Description of Organization: Senior Advocacy

Address of Organization: 7200 Bancroft Ave, Ste 178 -Oakland, CA 94605  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To promote attendance at an event held at a County facility in order to maximize potential County revenue from parking

**5. Verification**

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

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 10/31/10  
Signature of Agency Head or Designee Print Name Title (month, day, year)

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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 10 / 22 / 10 Description of Event: Shakira Concert  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 113.75

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 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

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4  
 Name of Individual or Organization: United Seniors of Oakland & Alameda County Number of Tickets: 4  
 Description of Organization: Senior Advocacy  
 Address of Organization: 7200 Bancroft Ave, Ste 178-Oakland, CA 94605  
Number and Street City State Zip Code  
 Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To promote attendance at an event held at a County facility in order to maximize potential County revenue from parking

**5. Verification**

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<b>Agency Contact</b> (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office		<b>Date of Original Filing:</b> _____ (month, day, year)	

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

Date(s) of Event: 11 / 19 / 10 Description of Event: Warriors v. Knicks  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 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

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

Name of Behesting Agency Official: Supervisor Gail Steele

Name of Individual or Organization: League of Volunteers Number of Tickets: 4

Description of Organization: promotes volunteerism and enhances quality of life in Tri-Valley cities

Address of Organization: 36120 Ruschin Drive Newark CA 94560  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
to reward a non-profit organization for its contributions to the community

**5. Verification**

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


 \_\_\_\_\_ CRYSTAL HISHIDA GRAFF \_\_\_\_\_ PRINCIPAL ANALYST \_\_\_\_\_ 10/20/10  
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**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 10 / 22 / 10 Description of Event: Shakira  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 113.75

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 2 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

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

Name of Behesting Agency Official: Supervisor Alice Lai-Bitker, District 3  
 Name of Individual or Organization: Doug Trampetti Number of Tickets: 2  
 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.)  
To promote attendance at an event held at a County facility in order to maximize County revenue from concession sales

**5. Verification**

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

Date(s) of Event: 10 / 22 / 10 Description of Event: Shakira  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 113.75

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 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
Wilson, Shawn	4	To promote attendance at event at a County facility

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

Name of Behesting Agency Official: Supervisor Alice Lai-Bitker, District 3

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

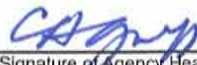
Description of Organization: \_\_\_\_\_

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

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To promote attendance at an event held at a County facility in order to maximize County revenue from concession sales

**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	<u>CRYSTAL HISHIDA GRAFF</u> Print Name	<u>PRINCIPAL ANALYST</u> Title	<u>10/22/10</u> (month, day, year)
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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 10 / 30 / 10 Description of Event: Gorillaz Concert  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 78.40

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 2 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

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4  
 Name of Individual or Organization: Sarah Miley & Vicky Lee Number of Tickets: 2  
 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.)  
To promote attendance at an event held at a County facility in order to maximize potential County revenue from parking

**5. Verification**

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

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 10/30/10  
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<b>Agency Contact</b> (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 11 / 15 / 10 Description of Event: Warriors Basketball  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 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

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

Name of Behesting Agency Official: Alameda County Supervisor Scott Haggerty, District 1

Name of Individual or Organization: City of Fremont Aging and Family Services Number of Tickets: 4

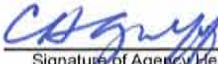
Description of Organization: City's care for the elderly

Address of Organization: c/o CITY OF FREMONT PO BOX 5006 FREMONT, CA 94537-5006  
 \_\_\_\_\_  
 Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
TO REWARD A NON-PROFIT ORGANIZATION FOR ITS CONTRIBUTIONS TO THE COMMUNITY

**5. Verification**

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

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 10/30/10  
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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office		Date of Original Filing: _____ (month, day, year)	

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

Date(s) of Event: 02 / 09 / 11 Description of Event: Basketball Game  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 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

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4  
 Name of Individual or Organization: Chinese Christian Schools Number of Tickets: 4  
 Description of Organization: Provides support for school extra curriculum  
 Address of Organization: 1801 North Loop Rd - Alameda, CA 94502  
Number and Street City State Zip Code  
 Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a nonprofit organization for its contributions to the community

**5. Verification**

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

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 10/31/10  
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**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 11 / 05 / 10 Description of Event: Golden State Warriors Game  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
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**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

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

Name of Behesting Agency Official: Supervisor Alice Lai-Bitker, District 3

Name of Individual or Organization: Oakland Asian Cultural Center Number of Tickets: 4


Description of Organization: Builds vibrant communities through Asian and Pacific Islander arts and culture programs

Address of Organization: 388 Ninth Street, Suite 290, Oakland, CA 94607  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a school or nonprofit organization for its contributions to the community

**5. Verification**

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


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Division, Department, or Region (if applicable) 1221 OAK STREET, #555			
Street Address OAKLAND, CA 94612			
Area Code/Phone Number (510) 272-3882	E-mail crystal.hishida@acgov.org	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	
Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 10 / 10 / 10 Description of Event: Football Game  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 150.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Oakland Raiders  
 Number of Tickets Received: 3 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

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4  
 Name of Individual or Organization: Patricia, Jason, and Jaimie Harris Number of Tickets: 3  
 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.)  
To promote attendance at an event held at a County facility in order to maximize potential county revenue from parking

**5. Verification**

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

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 10/30/10  
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.)  
and concession sales - 1 parking pass



**Tickets Provided by Agency Report**

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TICKETS PROVIDED BY AGENCY REPORT

<b>1. Agency Name</b> COUNTY OF ALAMEDA		Date Stamp	California Form <b>802</b> For Official Use Only
Division, Department, or Region (if applicable) 1221 OAK STREET, #555			
Street Address OAKLAND, CA 94612			
Area Code/Phone Number (510) 272-3882	E-mail crystal.hishida@acgov.org	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	
Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 10 / 15 / 10 Description of Event: Shakira Concert  
 \_\_\_\_\_ Face Value of Ticket: \$ 113.75

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 8 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

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: United Seniors of Oakland & Alameda County Number of Tickets: 8

Description of Organization: Senior Advocacy

Address of Organization: 7200 Bancroft Ave, Ste 178 -Oakland, CA 94605  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To promote attendance at an event held at a County facility in order to maximize potential County revenue from parking

**5. Verification**

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

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 10/31/10  
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.)  
and concession sales

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<b>1. Agency Name</b> COUNTY OF ALAMEDA		Date Stamp	<b>California Form 802</b>
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Area Code/Phone Number (510) 272-3882	E-mail crystal.hishida@acgov.org	<input type="checkbox"/> Amendment (Must explain in Part 5.)	
Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office		Date of Original Filing: _____ (month, day, year)	

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

Date(s) of Event: 12 / 25 / 10 Description of Event: Golden State Warriors vs. Portland Trailblazers  
 \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Face Value of Ticket: \$ 95.00

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

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 4 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
Carson, Keith	2	To evaluate the ability of a local sports team to attract bus

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

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District

Name of Individual or Organization: Carol Music Number of Tickets: 2

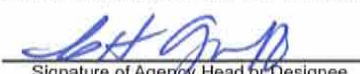
Description of Organization: \_\_\_\_\_

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

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To promote attendance at a County facility in order to maximize potential County revenue from parking and concession

**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	<u>CRYSTAL HISHIDA GRAFF</u> Print Name	<u>PRINCIPAL ANALYST</u> Title	<u>10/31/10</u> (month, day, year)
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Comment: (Use this space or an attachment for any additional information including amendment explanation.)





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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 01 / 14 / 11 Description of Event: Golden State Warriors vs. Los Angeles Clippers  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 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
Carson, Keith	2	To evaluate the ability of a local sports team to attract bus

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

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District  
 Name of Individual or Organization: Carol Music Number of Tickets: 2  
 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.)  
To promote attendance at a County facility in order to maximize potential County revenue from parking and concession

**5. Verification**

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


CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 10/21/10  
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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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 01 / 30 / 11 Description of Event: Golden State Warriors vs. Salt Lake City Jazz  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

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

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 4 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
Carson, Keith	2	To evaluate the ability of a local sports team to attract bus

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

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District

Name of Individual or Organization: Carol Music Number of Tickets: 2

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.)  
To promote attendance at a County facility in order to maximize potential County revenue from parking and concession

**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)

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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 02 / 05 / 11 Description of Event: Golden State Warriors vs. Chicago Bulls  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 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
Carson, Keith	2	To evaluate the ability of a local sports team to attract bus

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

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District

Name of Individual or Organization: Carol Music Number of Tickets: 2


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.)  
To promote attendance at a County facility in order to maximize potential County revenue from parking and concession

**5. Verification**

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

	CRYSTAL HISHIDA GRAFF	PRINCIPAL ANALYST	<u>10/31/10</u>
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(month, day, year)</small>

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



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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office		Date of Original Filing: _____ <small>(month, day, year)</small>	

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

Date(s) of Event: 02 / 25 / 11 Description of Event: Golden State Warriors vs. Atlanta Hawks  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 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 <small>(Last, First)</small>	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Carson, Keith	2	To evaluate the ability of a local sports team to attract bus

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

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District

Name of Individual or Organization: Carol Music Number of Tickets: 2


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.)  
To promote attendance at a County facility in order to maximize potential County revenue from parking and concession

**5. Verification**

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

	CRYSTAL HISHIDA GRAFF	PRINCIPAL ANALYST	<u>10/25/10</u>
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(month, day, year)</small>

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

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Area Code/Phone Number (510) 272-3882	E-mail crystal.hishida@acgov.org	<input type="checkbox"/> <b>Amendment</b> <i>(Must explain in Part 5.)</i>  <b>Date of Original Filing:</b> _____ <i>(month, day, year)</i>	
Agency Contact <i>(name and title)</i> Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 02 / 05 / 11 Description of Event: Golden State Warriors Game  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No *(Identify source of tickets below.)*  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 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 <i>(Last, First)</i>	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

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

Name of Behesting Agency Official: Supervisor Alice Lai-Bitker, District 3  
 Name of Individual or Organization: Darren Davis Number of Tickets: 4  
 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.)*  
To promote attendance at an event held at a County facility in order to maximize potential County revenue from sales

**5. Verification**

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

	CRYSTAL HISHIDA GRAFF	PRINCIPAL ANALYST	<u>10/21/10</u>
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small><i>(month, day, year)</i></small>

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



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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 10 / 29 / 10 Description of Event: Golden State Warriors Game  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 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

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

Name of Behesting Agency Official: Supervisor Alice Lai-Bitker, District 3

Name of Individual or Organization: Sandra Salas Number of Tickets: 4

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.)  
To promote attendance at an event held at a County facility in order to maximize potential County revenue from sales

**5. Verification**

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

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 10/30/10  
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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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 11 / 15 / 10 Description of Event: Basketball Game  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

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

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 2 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

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: Sobrante Time Banking Number of Tickets: 2

Description of Organization: Support for strengthening community

Address of Organization: 457 Capistrano Drive-Oakland, CA 94603  
 Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a nonprofit organization for its contributions to the community

**5. Verification**

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

CHG Signature of Agency Head or Designee      CRYSTAL HISHIDA GRAFF Print Name      PRINCIPAL ANALYST Title      10/21/10 (month, day, year)

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



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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 10 / 29 / 10 Description of Event: Golden State Warriors vs. Los Angeles Clippers  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 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
Carson, Keith	2	To evaluate the ability of a local sports team to attract bus

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

Name of Behesting Agency Official: Keith Carson, Supervisor Fifth District

Name of Individual or Organization: Carol Music Number of Tickets: 2

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.)  
To promote attendance at a County facility in order to maximize potential County revenue from parking and concession

**5. Verification**

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

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 10/29/10  
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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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 10 / 31 / 10 Description of Event: Football Game  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 150.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Oakland Raiders  
 Number of Tickets Received: 3 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

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: Sharonda White, Charles Drew IV, Anthony Byrd Number of Tickets: 3


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.)  
To promote attendance at an event held at a County facility in order to maximize potential county revenue from parking

**5. Verification**

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

     
 CRYSTAL HISHIDA GRAFF     
 PRINCIPAL ANALYST     
 10/31/10  
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.)  
and concession sales - 1 parking pass



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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 11 / 03 / 10 Description of Event: Golden State Warriors  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 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
Briones, Ruben	4	To promote attendance at event at a County facility

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

Name of Behesting Agency Official: Supervisor Alice Lai-Bitker, District 3

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.)  
To promote attendance at an event held at a County facility in order to maximize County revenue from concession sales

**5. Verification**

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

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 10/30/10  
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.)

**Tickets Provided by Agency Report**

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TICKETS PROVIDED BY AGENCY REPORT

<b>1. Agency Name</b> COUNTY OF ALAMEDA		Date Stamp	California Form <b>802</b> For Official Use Only
Division, Department, or Region (if applicable) 1221 OAK STREET, #555			
Street Address OAKLAND, CA 94612			
Area Code/Phone Number (510) 272-3882	E-mail crystal.hishida@acgov.org	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	
Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 11 / 15 / 10 Description of Event: Basketball Game  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 2 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

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: Breakfast of Champions Number of Tickets: 2

Description of Organization: Provides scholarships to educational institutes

Address of Organization: 530 Water Street-Oakland, CA 94607  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a nonprofit organization for its contributions to the community

**5. Verification**

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

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 10/31/10  
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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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office		Date of Original Filing: _____ (month, day, year)	

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

Date(s) of Event: 11 / 15 / 10 Description of Event: Basketball Game  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 2 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

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: Dublin High School PFSO Number of Tickets: 2


Description of Organization: Provides support to Dublin High School

Address of Organization: 8151 Village Parkway - Dublin, CA 94568  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a nonprofit organization for its contributions to the community

**5. Verification**

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

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 10/21/10  
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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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 11 / 03 / 10 Description of Event: WARRIOR'S GAME  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

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

Name of Outside Source of Ticket(s) Provided to Agency: GOLDEN STATE WARRIORS

Number of Tickets Received: 2 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

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

Name of Behesting Agency Official: ALAMEDA COUNTY SUPERVISOR SCOTT HAGGERTY- DIST. 1

Name of Individual or Organization: American High School, Fremont Number of Tickets: 2

Description of Organization: High School

Address of Organization: 36300 Fremont, CA 94536  
 Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
TO REWARD A SCHOOL OR NONPROFIT ORGANIZATION FOR ITS CONTRIBUTIONS TO THE COMMUNITY

**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)

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(510) 272-3882	crystal.hishida@acgov.org		
Agency Contact (name and title)			
Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 12 / 27 / 10 Description of Event: Basketball Game

Face Value of Ticket: \$ 95.00

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

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 4 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

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: Redwood Hieghts Elementary School Number of Tickets: 4

Description of Organization: Provide support for school's music, language art, and science programs

Address of Organization: 4401 39th Avenue - Oakland, CA 94619

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a nonprofit organization for its contributions to the community

**5. Verification**

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

Crystal Hishida Graff      CRYSTAL HISHIDA GRAFF      PRINCIPAL ANALYST      10/25/10

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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1221 OAK STREET, #555			
<b>Street Address</b>			
OAKLAND, CA 94612			
<b>Area Code/Phone Number</b>	<b>E-mail</b>	<input type="checkbox"/> <b>Amendment</b> <i>(Must explain in Part 5.)</i>  <b>Date of Original Filing:</b> _____ <small>(month, day, year)</small>	
(510) 272-3882	crystal.hishida@acgov.org		
<b>Agency Contact</b> <i>(name and title)</i>			
Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 10 / 14 / 10 Description of Event: Shakira Concert

Face Value of Ticket: \$ 113.75

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

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: \_\_\_\_\_ 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 <small>(Last, First)</small>	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: Matt Turner 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.)*  
To reward a community volunteer for his service to the public

**5. Verification**

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

	CRYSTAL HISHIDA GRAFF	PRINCIPAL ANALYST	<u>10/31/10</u>
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(month, day, year)</small>

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

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Street Address OAKLAND, CA 94612			
Area Code/Phone Number (510) 272-3882	E-mail crystal.hishida@acgov.org	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	
Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 10 / 10 / 10 Description of Event: Raiders Game - San Diego Chargers  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 150

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 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
Alameda County Supervisor Scott Haggerty,	4	To evaluate the ability of a facility, its operator, or a local
District One		sports team to attract business and contribute to the
		local economy

**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.

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 10/31/10  
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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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 10 / 09 / 10 Description of Event: How Sweet the Sound  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 7.00

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

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 4 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

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

Name of Behesting Agency Official: Alameda County Supervisor Scott Haggerty, District One

Name of Individual or Organization: Doug & Charlotte Lillard Number of Tickets: 4


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.)  
TO REWARD A COMMUNITY VOLUNTEER FOR HIS OR HER SERVICE TO THE PUBLIC

**5. Verification**

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

 <small>Signature of Agency Head or Designee</small>	<u>CRYSTAL HISHIDA GRAFF</u> <small>Print Name</small>	<u>PRINCIPAL ANALYST</u> <small>Title</small>	<u>10/31/10</u> <small>(month, day, year)</small>
--	---	--	--

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





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<b>1. Agency Name</b>		Date Stamp	<b>California Form 802</b> For Official Use Only
COUNTY OF ALAMEDA			
Division, Department, or Region (if applicable) 1221 OAK STREET, #555 Street Address OAKLAND, CA 94612			
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(510) 272-3882	crystal.hishida@acgov.org		
Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 10 / 17 / 10 Description of Event: Disney on Ice  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 25.00

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

Name of Outside Source of Ticket(s) Provided to Agency: GSW

Number of Tickets Received: 8 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

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

Name of Behesting Agency Official: Alameda County Supervisor Scott Haggerty, District 1

Name of Individual or Organization: Rodney Clark S.A.V.E Number of Tickets: 8


Description of Organization: Shelter Against Violent Environments

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

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
to reward an community volunteer for his service to the public.

**5. Verification**

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

	CRYSTAL HISHIDA GRAFF	PRINCIPAL ANALYST	<u>10/31/10</u>
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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<b>Area Code/Phone Number</b> (510) 272-3882	<b>E-mail</b> crystal.hishida@acgov.org	<input type="checkbox"/> <b>Amendment</b> (Must explain in Part 5.) <b>Date of Original Filing:</b> _____ (month, day, year)	
<b>Agency Contact</b> (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 10 / 14 / 10 Description of Event: Disney on Ice  
10 / 16 / 10 Face Value of Ticket: \$ 25.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: GSW  
 Number of Tickets Received: 8 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

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

Name of Behesting Agency Official: Alameda County Supervisor Scott Haggerty, District 1

Name of Individual or Organization: Louis Chicoine, ABODE Number of Tickets: 8


Description of Organization: Shelter in Fremont serving the homeless population

Address of Organization: 40849 Fremont Boulevard Fremont, CA 94538  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
to reward an community volunteer for his service to the public.

**5. Verification**

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

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 10/31/10  
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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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 10 / 30 / 10 Description of Event: Gorillaz Concert  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 78.40

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

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 1 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

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: Kaityln Quackenbush Number of Tickets: 1


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.)  
To promote attendance at an event held at a County facility in order to maximize potential County revenue from parking

**5. Verification**

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

	CRYSTAL HISHIDA GRAFF	PRINCIPAL ANALYST	<u>10/30/10</u>
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.)  
and concession sales

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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 10 / 30 / 10 Description of Event: Gorillaz Concert  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 78.40

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

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 1 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

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: Kevin Reyes Number of Tickets: 1


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.)  
To promote attendance at an event held at a County facility in order to maximize potential County revenue from parking

**5. Verification**

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

	CRYSTAL HISHIDA GRAFF	PRINCIPAL ANALYST	<u>10/31/10</u>
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.)  
and concession sales



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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 10 / 30 / 10 Description of Event: Gorillaz Concert  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 78.40

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

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 1 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

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: Christian Hodges Number of Tickets: 1


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.)  
To promote attendance at an event held at a County facility in order to maximize potential County revenue from parking

**5. Verification**

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

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 10/31/10  
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.)  
and concession sales

**Tickets Provided by Agency Report**

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TICKETS PROVIDED BY AGENCY REPORT

<b>1. Agency Name</b> COUNTY OF ALAMEDA		Date Stamp	<b>California Form 802</b> <small>For Official Use Only</small>
Division, Department, or Region (if applicable) 1221 OAK STREET, #555			
Street Address OAKLAND, CA 94612			
Area Code/Phone Number (510) 272-3882	E-mail crystal.hishida@acgov.org	<input type="checkbox"/> Amendment (Must explain in Part 5.)	
Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office		Date of Original Filing: _____ <small>(month, day, year)</small>	

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

Date(s) of Event: 10 / 29 / 10 Description of Event: Basketball Game  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 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 <small>(Last, First)</small>	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: Women on the Way to Recovery Number of Tickets: 4


Description of Organization: Re-entry program for women

Address of Organization: 20424 Haviland, Hayward, CA 94541  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a nonprofit organization for its contributions to the community

**5. Verification**

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

	CRYSTAL HISHIDA GRAFF	PRINCIPAL ANALYST	<u>10/29/10</u>
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(month, day, year)</small>

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



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<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)			

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

Date(s) of Event: 11 / 03 / 10 Description of Event: Basketball Game  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 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

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4  
 Name of Individual or Organization: Women on the Way to Recovery Number of Tickets: 4  
 Description of Organization: Re-entry program for women  
 Address of Organization: 20424 Haviland, Hayward, CA 94541  
Number and Street City State Zip Code  
 Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a nonprofit organization for its contributions to the community

**5. Verification**

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

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 10/31/10  
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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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office		Date of Original Filing: _____ (month, day, year)	

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

Date(s) of Event: 11 / 05 / 10 Description of Event: Basketball Game  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 4 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

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: United Seniors of Oakland & Alameda County Number of Tickets: 4

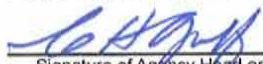
Description of Organization: Senior Advocacy

Address of Organization: 7200 Bancroft Ave, Ste 178-Oakland, CA 94605  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a nonprofit organization for its contributions to the community

**5. Verification**

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

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 10/21/10  
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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TICKETS PROVIDED BY AGENCY REPORT

<b>1. Agency Name</b>		Date Stamp	California Form <b>802</b> For Official Use Only
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Division, Department, or Region (if applicable)			
1221 OAK STREET, #555			
Street Address			
OAKLAND, CA 94612			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	
(510) 272-3882	crystal.hishida@acgov.org		
Agency Contact (name and title)			
Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 11 / 06 / 10 Description of Event: Family Bridges Concert

\_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 91.75

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

Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors

Number of Tickets Received: 2 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

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: Jennifer Mok and Johnny Tang Number of Tickets: 2


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.)  
To reward a community volunteer for their service to the public

**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

CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST  
Print Name Title

10/27/10  
(month, day, year)

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

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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 11 / 06 / 10 Description of Event: Family Bridges Concert  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 91.75

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 2 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

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: Angela and John Jow Number of Tickets: 2

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.)  
To reward a community volunteer for their service to the public

**5. Verification**

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

CHG CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 10/30/10  
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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Agency Contact (name and title) Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

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

Date(s) of Event: 11 / 15 / 10 Description of Event: Basketball Game  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 95.00

Agency Event  Yes  No (Identify source of tickets below.)  
 Name of Outside Source of Ticket(s) Provided to Agency: Golden State Warriors  
 Number of Tickets Received: 2 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

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

Name of Behesting Agency Official: Alameda County Supervisor Nate Miley, District 4

Name of Individual or Organization: Sobrante Time Banking Number of Tickets: 2

Description of Organization: Support for strengthening community

Address of Organization: 457 Capistrano Drive-Oakland, CA 94603  
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  
To reward a nonprofit organization for its contributions to the community

**5. Verification**

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

 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 10/21/10  
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.)