

Tickets Provided by Agency Report

A Public Document

TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
32nd District Agricultural Association			
Division, Department, or Region (if applicable)			
Street Address			
88 Fair Drive, Costa Mesa, CA			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	
(714) 708-1500	executive@ocfair.com		
Agency Contact (name and title)			
Dena Heathman, Ticket Administrator Designee			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 8 / 5 / 10 Description of Event: Maloof Money Cup

____ / ____ / ____ Face Value of Ticket: \$ 15.00

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

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

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 (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
David Ellis	4	Board member performing their duties.
Gary Hayakawa	4	Board member performing their duties.

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.

Dena Heathman DN: cn=Dena Heathman, o=OC Fair & Event Center, ou=Administration, email=dheathman@ocfair.com, c=US Date: 20100807 10:14:11 -0700

Signature of Agency Head or Designee Dena Heathman Print Name Ticket Administrator Designee Title 8/7/10 (month, day, year)

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

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