

**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
COUNTY OF ALAMEDA			
Division, Department, or Region (if applicable)		<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	
1221 OAK STREET, #555			
Street Address			
OAKLAND, CA 94612			
Area Code/Phone Number	E-mail		
(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: 01 / 13 / 10 Description of Event: Golden State Warriors vs. Miami Heat

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: Keith Carson, Supervisor Fifth District

Name of Individual or Organization: Pastor Brondon Rheems 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 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.



Signature of Agency Head or Designee

CRYSTAL HISHIDA GRAFF

Print Name

PRINCIPAL ANALYST

Title

1/13/10
(month, day, year)

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

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2. Event For Which Tickets Were Distributed

Date(s) of Event: 01 / 13 / 10 Description of Event: Golden State Warriors vs. Miami Heat

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
Carson, Keith	2	Obtain oversight of facilities

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

Name of Behesting Agency Official: Supervisor Keith Carson, District 5

Name of Individual or Organization: _____ Number of Tickets: _____

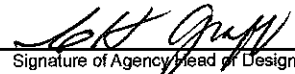
Description of Organization: _____

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	<u>1/11/10</u>
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: 01 / 13 / 10 Description of Event: Golden State Warriors vs. Miami Heat

 _____ 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: Keith Carson, Supervisor Fifth District

Name of Individual or Organization: Minister Keith Muhammad 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 his or her service to the public.

5. Verification

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 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 1/10/10
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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2. Event For Which Tickets Were Distributed

Date(s) of Event: 01 / 13 / 10 Description of Event: Golden State Warriors vs. Miami Heat

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: Keith Carson, Supervisor Fifth District

Name of Individual or Organization: Bishop Keith Clark Number of Tickets: 2

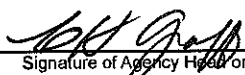
Description of Organization: _____

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 his or her service to the public.

5. Verification

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	CRYSTAL HISHIDA GRAFF	PRINCIPAL ANALYST	<u>1/11/10</u>
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

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2. Event For Which Tickets Were Distributed

Date(s) of Event: 01 / 29 / 10 Description of Event: Basketball Game
 _____ / _____ / _____ Face Value of Ticket: \$ 9.5-

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: Vy Le Number of Tickets: 1

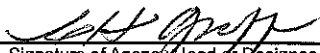
Description of Organization: _____

Address of Organization: _____
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
to encourage staff development

5. Verification

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 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 1/12/10
Signature of Agency Head or Designee Print Name Title (month, day, year)

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2. Event For Which Tickets Were Distributed

Date(s) of Event: 01 / 29 / 10 Description of Event: Basketball Game
 _____ / _____ / _____ 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: 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: Stacy Zhang 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 encourage staff development

5. Verification

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

	<u>CRYSTAL HISHIDA GRAFF</u> <small>Print Name</small>	<u>PRINCIPAL ANALYST</u> <small>Title</small>	<u>1/12/10</u> <small>(month, day, year)</small>
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Date(s) of Event: 01 / 29 / 10 Description of Event: Basketball Game
 _____ / _____ / _____ 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: 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: Maria Tosco Number of Tickets: 1

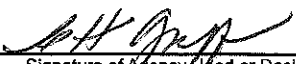
Description of Organization: _____

Address of Organization: _____
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
to encourage staff development

5. Verification

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 CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 1/12/10
Signature of Agency Head or Designee Print Name Title (month, day, year)

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2. Event For Which Tickets Were Distributed

Date(s) of Event: 01 / 29 / 10 Description of Event: Basketball Game
 _____ / _____ / _____ 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: 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: Alejandro Garcia 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 encourage staff development

5. Verification

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<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(month, day, year)</small>

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Crystal Hishida Graff, Principal Analyst, County Administrator's Office			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 01 / 29 / 10 Description of Event: Basketball Game

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: 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: Reynato Gloria 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 encourage staff development

5. Verification

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<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(month, day, year)</small>

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2. Event For Which Tickets Were Distributed

Date(s) of Event: 01 / 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: 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: Douglas Bond 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 encourage staff development

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
 1/12/10
Signature of Agency Head or Designee Print Name Title (month, day, year)

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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: Scot Allan 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 encourage staff development

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Signature of Agency Head or Designee

CRYSTAL HISHIDA GRAFF _____
Print Name

PRINCIPAL ANALYST _____
Title

1/12/10
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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 Barbaro 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 encourage staff development

5. Verification

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	CRYSTAL HISHIDA GRAFF	PRINCIPAL ANALYST	<u>1/12/10</u>
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: 01 / 08 / 10 Description of Event: Basketball Game
 _____ 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: 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: Joe Rodgers 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.)
volunteer contribution to 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 1/7/10
Signature of Agency Head or Designee Print Name Title (month, day, year)

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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: Angelina Rodriguez 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.)
volunteer contribution to 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 1/7/10
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

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
COUNTY OF ALAMEDA			
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: 02 / 10 / 10 Description of Event: WARRIOR'S GAME
02 / 25 / 10 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: 20 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: FOOTHILL HIGH SCHOOL Number of Tickets: 20

Description of Organization: HIGH SCHOOL

Address of Organization: 7908 FAIROAKS COURT PLEASANTON CA 94588
Number and Street City State Zip Code

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

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
 Print Name
 PRINCIPAL ANALYST
 Title
 1/28/10
 (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

1. Agency Name		Date Stamp	California Form 802 <small>For Official Use Only</small>
COUNTY OF ALAMEDA			
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: _____ <small>(month, day, year)</small>	
(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: 01 / 27 / 10 Description of Event: Golden State 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: 12 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 SCOTT HAGGERTY- DISTRICT ONE

Name of Individual or Organization: LIVERMORE HERITAGE GUILD Number of Tickets: 12

Description of Organization: TO ENSURE AWARENESS AND PROTECTION OF LIVERMORES RICH HERITAGE

Address of Organization: P.O. BOX 961 LIVERMORE CA 94551

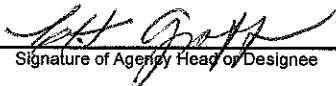
Number and Street City State Zip Code

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>1/27/10</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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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: _____ (month, day, year)	

2. Event For Which Tickets Were Distributed

Date(s) of Event: 2 / 27 / 10 Description of Event: Monster Jam

Face Value of Ticket: \$ 30.00

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
Scott Haggerty, Alameda Co. Supervisor, D-1	4	To review facilities or events that require County funding or support.

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

Name of Behesting Agency Official: Supervisor S. Haggerty, District 1

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 1/22/10
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

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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: _____ <small>(month, day, year)</small>	
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 / 13 / 10 Description of Event: BILLY JOEL/ELTON JOHN
 _____ Face Value of Ticket: \$ _____

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		TO REVIEW FACILITIES OR EVENTS THAT REQUIRE
SCOTT HAGGERTY DISTRICT 1	4	COUNTY FUNDING OR SUPPORT

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

Name of Behesting Agency Official: Supervisor S. Haggerty, District 1

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

1/22/10
(month, day, year)

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

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Agency Report**

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TICKETS PROVIDED BY
AGENCY REPORT

1. Agency Name COUNTY OF ALAMEDA		Date Stamp	California Form 802 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.)	
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 / 10 / 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: 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- DIST. 1

Name of Individual or Organization: SOROPTIMIST INTERNATIONAL Number of Tickets: 4

Description of Organization: SOROPTIMIST INTERNATIONAL OF PLEASANTON/DUBLIN


Address of Organization: P.O. BOX 51 PLEASANTON CA 94566

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

CRYSTAL HISHIDA GRAFF

Print Name

PRINCIPAL ANALYST

Title

1/22/10
(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

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
COUNTY OF ALAMEDA			
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: 02 / 17 / 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: 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: Amish Patel 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.)
volunteer contribution to 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>1/22/10</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.)

Tickets Provided by Agency Report

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1. Agency Name		Date Stamp	California Form 802
COUNTY OF ALAMEDA			For Official Use Only
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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: 02 / 17 / 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: Camps In Common Number of Tickets: 4


Description of Organization: provides camp scholarships for oakland youth

Address of Organization: 462 Elwood Avenue Oakland, CA 94610

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
volunteer contribution to 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>1/22/10</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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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802 <small>For Official Use Only</small>
COUNTY OF ALAMEDA			
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: _____ <small>(month, day, year)</small>	
(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: 02 / 17 / 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: 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: Saeng Saephan 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.)
volunteer contribution to 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.

 <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>02/17/10</u> <small>(month, day, year)</small>
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Comment: (Use this space or an attachment for any additional information including amendment explanation.)
4444

Tickets Provided by Agency Report

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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
COUNTY OF ALAMEDA			
Division, Department, or Region <i>(if applicable)</i>			
1221 OAK STREET, #555			
Street Address			
OAKLAND, CA 94612			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment <i>(Must explain in Part 5.)</i> Date of Original Filing: _____ <i>(month, day, year)</i>	
(510) 272-3882	crystal.hishida@acgov.org		
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: 01 / 08 / 10 Description of Event: Basketball Game

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: 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: Jim Kennedy 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.)*
volunteer contribution to 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 of Designee
 CRYSTAL HISHIDA GRAFF
 Print Name
 PRINCIPAL ANALYST
 Title
 1/6/10
 (month, day, year)

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

Tickets Provided by Agency Report

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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name COUNTY OF ALAMEDA		Date Stamp	California Form 802 For Official Use Only
Division, Department, or Region (if applicable)			
Street Address 1221 OAK STREET, #555, 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: <u>01/06/2010</u> <small>(month, day, year)</small>	
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 / 16 / 10 Description of Event: Harlem Globetrotters
 Face Value of Ticket: \$ 33.00

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: Supervisor Alice Lai-Bitker, District 3
 Name of Individual or Organization: Mei-Ling Bitker 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

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

[Signature] CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 1/7/10
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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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: 01 / 08 / 10 Description of Event: Basketball Game
 _____ / _____ / _____ 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: 1 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

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

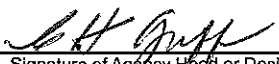
Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

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: Chris Miley 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.)
volunteer contribution to 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 1/7/10
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.)
volunteer contribution to community

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Street Address OAKLAND, CA 94612		<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	
Area Code/Phone Number 510-272-3882	E-mail 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: 1 / 23 / 10 Description of Event: Eddie Izzard
 _____ Face Value of Ticket: \$ 79 ✓

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: 12 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, District 2

Name of Individual or Organization: Eden Youth & Family Center Number of Tickets: 12

Description of Organization: provides mult-services to disadvantaged youth and families from Hayward environs

Address of Organization: 680 W. Tennyson Road Hayward CA 94144
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 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 1/11/10
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 Report**

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TICKETS PROVIDED BY
AGENCY REPORT

1. Agency Name COUNTY OF ALAMEDA		Date Stamp	California Form 802 For Official Use Only
Division, Department, or Region (if applicable)			
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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: <u>01/08/2010</u> (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: 01 / 20 / 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: Russ Underwood Number of Tickets: 4

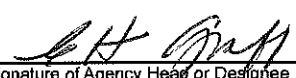
Description of Organization: _____

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 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 1/11/10
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

1. Agency Name COUNTY OF ALAMEDA		Date Stamp	California Form 802 For Official Use Only
Division, Department, or Region (if applicable)			
Street Address 1221 OAK STREET, #555, 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: <u>01/08/2010</u> (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: 01 / 16 / 10 Description of Event: Harlem Globetrotters
 _____ / _____ / _____ Face Value of Ticket: \$ 33.00

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: Supervisor Alice Lai-Bitker, District 3

Name of Individual or Organization: Barbara Teixeira Number of Tickets: 2

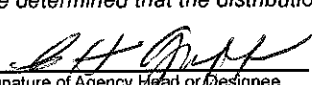
Description of Organization: _____

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

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

1/11/10
(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: 01 / 08 / 10 Description of Event: Basketball Game

 _____ 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: 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: Jim Kennedy Number of Tickets: 1

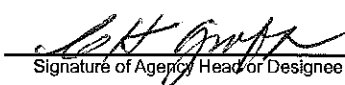
Description of Organization: _____

Address of Organization: _____
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
volunteer contribution to 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 1/6/10
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.)
volunteer contribution to community

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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: 01 / 08 / 10 Description of Event: Basketball Game
 _____ Face Value of Ticket: \$ 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: 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: Alan Dones 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.)
volunteer contribution to 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

CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST
Print Name Title

1/6/10
(month, day, year)

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

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COUNTY OF ALAMEDA			
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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 / 08 / 10 Description of Event: Basketball Game
 _____ 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: 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
Darryl Stewart	2	Oversee facility

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: _____ 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	<u>1/6/10</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			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 02 / 27 / 10 Description of Event: Monster Jam
 _____ / _____ / _____ Face Value of Ticket: \$ 30.00

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: 5 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: Robert & Kristine Coffelt Number of Tickets: 5

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.)
volunteer contribution to 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
 11/19/10
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.)
3-GS, 2NM

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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 / 27 / 10 Description of Event: Monster Jam
 _____ Face Value of Ticket: \$ 30.00

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: Danny Chu 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.)
volunteer contribution to 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
 11/19/10
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: 03 / 22 / 10 Description of Event: Warriors v. Suns
 _____ 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: 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 Gail Steele, District 2
 Name of Individual or Organization: Lighthouse Community Center Number of Tickets: 2
 Description of Organization: serves LGBTQ community and allies in Southern Alameda County
 Address of Organization: 1217 A Street Hayward CA 94541
Number and Street City State Zip Code
 Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
to promote health, motivate and provide expanded opportunities to vulnerable populations in the County / community contribution

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] CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 1/19/10
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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1. Agency Name COUNTY OF ALAMEDA		Date Stamp	California Form 802 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: 03 / 22 / 10 Description of Event: Warriors v. Suns
 _____ 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 2nd District
 Name of Individual or Organization: Sunol Business Guild Number of Tickets: 4
 Description of Organization: promotes economic opportunities in the Sunol environs of Alameda County
 Address of Organization: P.O. Box 94 Sunol CA 94586
 Number and Street City State Zip Code
 Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
Community contribution

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] CRYSTAL HISHIDA GRAFF PRINCIPAL ANALYST 1/19/10
 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

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
COUNTY OF ALAMEDA 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: 02 / 17 / 10 Description of Event: Basketball Game
 _____ / _____ / _____ 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: 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: Stanford Ma 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.)
volunteer contribution to 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 1/12/10
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: 02 / 17 / 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: 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: Milton Ma 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.)
volunteer contribution to 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.

	<u>CRYSTAL HISHIDA GRAFF</u>	<u>PRINCIPAL ANALYST</u>	<u>1/12/10</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	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: 01 / 29 / 10 Description of Event: Basketball Game

 _____ 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: 10 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: 10


Description of Organization: Senior Advocacy

Address of Organization: 7200 Bancroft Avenue, Suite 178, Oakland, CA 94605
 Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
volunteer contribution to 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

1/12/10
 (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: 01 / 16 / 10 Description of Event: Harlem Globetrotters
 _____ / _____ / _____ Face Value of Ticket: \$ 33-

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: Marvin and Linda Tangren 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.)
family's contribution to 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 1/12/10
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: 01 / 16 / 10 Description of Event: Harlem Globetrotters

Face Value of Ticket: \$ 33-

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: David & Michelle Haubert 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.)
volunteer contribution to 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
 1/12/10
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 / 16 / 10 Description of Event: Harlem Globetrotters

 _____ Face Value of Ticket: \$ 32

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: Karissa & Courtney Haubert 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.)
outstanding academic achievement

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 1/12/10
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.)
