Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions OF SACRAMENTO A Public Document 1. Agency Name SUBate/Stamp California Sacramento County Board of Supervisors Form Division, Department, or Region (if applicable) 26 PM 12: 2% For Official Use Only 7018 JU District 4 Designated Agency Contact (Name, Title) Matt Hedges, Chief of Staff Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail (916) 874-5491 HedgesM@SacCounty.Net Date of Original Filing: . (month, day, year) 2. Function or Event Information Does the agency have a ticket policy? Yes ⊠ No □ Face Value of Each Ticket/Pass \$ _ Event Description: River Cats Baseball Tickets Date(s) 4 / 2 / 18 Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ⊠ No 🗆 Was ticket distribution made at the behest Yes ☒ No ☐ If yes: Matt Hedges Official's Name (Last, First) of agency official? Recipients • Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization. Number Name of Agency, Department or Unit Α. Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ Passes See Attachment Number В. Name of Individual of Ticket(s)/ Identify one of the following: (Last, First) Passes See Attachment Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization C. of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy (include address and description) Passes See Attachment 4. Verification I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements. Matt Hedges Chief of Staff Print Name (month, day, year)

Comment: _

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions Continuation Sheet



| | gency Name ramento County Board of Supervisors | | | | | |
|---|--|-----------------------------------|--|--|--|--|
| | Recipients • Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization. | | | | | |
| | A. Name of Agency, Department or Unit | Number of Ticket(s)/ Passes | Describe the public purpose made pursuant to the agency's policy | | | |
| | | | | | | |
| | | | | | | |
| | | Number | | | | |
| | B. Name of Individual (Last, First) | of Ticket(s)/ Passes | Identify one of the following: | | | |
| | | | Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below: | | | |
| | | | Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below: | | | |
| | | | Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below: | | | |
| • | | | Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below: | | | |
| | C. Name of Outside Organization (include address and description) | Number of Ticket(s)/ Passes | Describe the public purpose made pursuant to the agency's policy | | | |
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| community. | 50 | Auburn Blvd., Citrus Heights |
|---|------------------|---|
| In recognition of the programs and services they provide the | | Sunrise Recreation & Park District 7801 |
| In recognition of the programs and services they provide the | 50 | 810 Oak Lane, Rio Linda |
| COHIHOHIY. | | Rio Linda Elverta Bearcoation & Bark District |
| | 50 | Hazel Avenue. Orangevale |
| In recognition of the programs and services they provide the | | Orangevale Recreation & Park District 6826 |
| community. | 50 | Folsom |
| In recognition of the programs and specious thou provide the | | Folsom Parks District 50 Natoma Street |
| community | 10 | 200 Wool Street, Folsom |
| In recognition of the programs and services they provide the | | Folsom Chamber of Commerce |
| community. | 50 | 46 Natomas Street, Folsom |
| In recognition of the programs and services they provide the | | Folsom Police Foundation |
| community. | 20 | 400 Slobe Avenue, Sacramento |
| In recognition of the programs and services they provide the | | North Sac Chamber of Commerce |
| community. | 50 | |
| In recognition of the programs and services they provide the | | 6315 Fountain Sauare Drive. Citrus Heights |
| | | Citrus Heights Police Activity Leggue |
| community. | 20 | Orangevale |
| In recognition of the programs and services they provide the | | 926/ Greenback Lane, Suite B91 |
| | | Orangevale Chambner of Commerce |
| community. | 20 | Citrus Heights |
| In recognition of the programs and services they provide the | | 7920 Alta Sunrise Drive, Suite 100 |
| | | Citrus Heights Chamber of Commerce |
| | Ticket(s)/Passes | address and description) |
| Describe the public purpose made pursuant to the agency's | Number of | C. Name of Outside Organiztion (Include |
| Other: For particiaption in community engagement. | ω | Hall, David |
| Other: For particiaption in community engagement. | 3 | Parshall, Loretta |
| Other: For particiaption in community engagement. | 3 | Jacobs, Kathy |
| Other: For particiaption in community engagement. | 2 | Prendergast, John |
| Identify One of the following: Cermonial Role/Other/Income | Ticket(s)/Passes | B. Name of Individual (Last, First) |
| | Number of | |
| | | |
| Describer the public purpose made pursuant to agency's policy | Ticket(s)/Passes | A. Name of Agency, Department or Unity |
| | 1 | |

| Casa Roble Fundamental High School 9151 Oak Avenue, Orangevale, CA 956625 | |
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| 6 | |
| In support of the Casa Roble football program | |