

**Tickets Provided by Agency Report**

**A Public Document**

TICKETS PROVIDED BY AGENCY REPORT

<b>1. Agency Name</b> 49th DAA/LAKE COUNTY FAIR		Date Stamp	<b>California Form 802</b> For Official Use Only
Division, Department, or Region (if applicable)			
Street Address 401 MARTIN STREET, LAKEPORT, CA 95453			
Area Code/Phone Number 707 263-6181	E-mail debbie@lakecountyfair.com	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: <u>OCTOBER 1, 2010</u> (month, day, year)	
Agency Contact (name and title) RICHARD PERSONS, CEO			

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

Date(s) of Event: 09 / 02 / 10 Description of Event: LAKE COUNTY FAIR  
09 / 05 / 10 Face Value of Ticket: \$ 9.00

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
BOGNER, JANEANE	12	FOR DISTRIBUTION TO POTENTIAL SPONSORS
CHAUVIN, MARICA	12	FOR DISTRIBUTION TO POTENTIAL SPONSORS
COCHRANE, JAMES	12	FOR DISTRIBUTION TO POTENTIAL SPONSORS

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

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

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

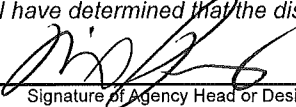
Description of Organization: \_\_\_\_\_

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

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

**5. Verification**

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


 \_\_\_\_\_ RICHARD PERSONS \_\_\_\_\_ CEO \_\_\_\_\_ 10/1/10  
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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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
HOPKINS, ANNETTE	12	FOR DISTRIBUTION TO POTENTIAL SPONSORS
MARRUFO, MEYO	12	FOR DISTRIBUTION TO POTENTIAL SPONSORS
McQUEEN, JERRY	12	FOR DISTRIBUTION TO POTENTIAL SPONSORS

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

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

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

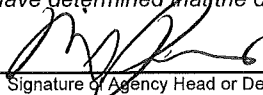
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	RICHARD PERSONS	CEO	10/1/10
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(month, day, year)</small>

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ROBERTSON, CAROL	12	FOR DISTRIBUTION TO POTENTIAL SPONSORS
TAYLOR, GARY	12	FOR DISTRIBUTION TO POTENTIAL SPONSORS
PERSONS, RICHARD	50	For distribution to potential sponsors, vendors, employees

**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: \_\_\_\_\_

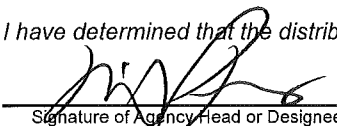
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