

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

A Public Document

1. Agency Name

County of Sacramento

Division, Department, or Region (if applicable)

Board of Supervisors, District 2

Designated Agency Contact (Name, Title)

Susan McKee, Chief of Staff

Area Code/Phone Number

(916) 874-5481

E-mail

mckees@saccounty.net

COUNTY OF SACRAMENTO
BOARD OF SUPERVISORS

2017 MAY 18 PM 4:06

California Form **802**

For Official Use Only

Amendment (Must Provide Explanation in Part 3.)

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 \$ 20.00

Event Description: River Cats Vouchers Date(s) _____
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: River Cats
Name of Source

Was ticket distribution made at the behest of agency official? Yes No If yes: Kennedy Patrick, Sacramento Supervisor
Official's Name (Last, First)

3. 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
see attached list	350	Support and appreciation for community non-profits that serve young people
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
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

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.


Signature of Agency Head or Designee

Susan McKee
Print Name

Chief of Staff
Title

5/4/2017
(month, day, year)

Comment: _____

2017

Organization	Contact	Email	#	Confirmed
Reading Partners	Rachel Minnick	Rachel.minnick@readingpartners.org	50	
La Familia	Rachel Rios	rachelr@lafcc.org	30	Pick Up -X
Hollywood Park Elementary	Tenley Luke	Tenley-Luke@scusd.edu	50	PK Drop Off - X
Ethel I. Baker	Amber Carter	Amber-Carter@scusd.edu	50	KR Drop Off - X
Kops n Kids	Kenny Alvarado	kcalvarado@gmail.com	15	Pick Up - X
Focus on Family	Jackie Rose	jrose@focusonfamilysacramento.com	40	PK Deliver - X
Asian Resources Inc	Stephanie Nguyen	stf_nguyen@yahoo.com	40	Pick Up - X
Sheriff's Athletic League	Dpty. Nathan Nguyen	nnguyen@sacsheriff.com	30	Pick UP - X
Sacramento Conservation Corps	David DeMers	ddemers@saccorps.org	40	SM Drop Off - X