Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document California 1. Agency Name Date Stamp Form 22nd District Agricultural Association For Official Use Only Division, Department, or Region (if applicable) **CDFA Designated Agency Contact** (Name, Title) Timothy J. Fennell, CEO Amendment (Must Provide Explanation in Part 3.) **Area Code/Phone Number** E-mail Date of Original Filing: 858-755-1161 (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 19 Does the agency have a ticket policy? Yes⊠ No 🗆 Event Description: 2018 San Diego County Fair 06 07 04 18 Date(s) -Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No □ If no: _ Name of Source If yes: Haydu, Lee Was ticket distribution made at the behest Yes ☒ No ☐ 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 Α. Name of Agency, Department or Unit of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy Passes Number Name of Individual В. of Ticket(s)/ Identify one of the following: (Last, First) Passes Ceremonial Role Other ___ Haydu, Lee If checking "Ceremonial Role" or "Other" describe below: 21 5.3a)Performance of a ceremonial role as Board Member]

| | l | representing the Board of Directors for the 22nd DAA |
|---|-----------------------------------|---|
| | | Ceremonial Role Other Income 5.3b) the official and/or job duties of the District Official require her attendance at the event. |
| 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 |
| Verification | | |

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance

Timothy J. Fennell CEO/General Manager
Signature of Agency Head or Désignee Print Name Title

‡omy∕ment: ˌ

with the requirements.

09/26/18

(month, day, year)

| | gency Report of: eremonial Role Even | ts and Ticket/P | ass Distri | butions | Α | Public Document |
|----|--|--|-----------------------------------|-------------------|---|--|
| 1. | Agency Name 22nd District Agricultural Ass Division, Department, or Regi | sociation | | | Date Stamp | California 802 Form 809 |
| | CDFA | | | | | |
| | Designated Agency Contact (Name, Title) | | | | | · |
| | Timothy J. Fennell | | | | Amendment /Must Di | rovide Explanation in Part 3.) |
| | Area Code/Phone Number | E-mail | | · | Amendment (Mast Fr | очив Ехріанавон ін Рац Э.) |
| | 858-755-1161 | | | | Date of Original Filing: ـ | (month, day, year) |
| 2. | Function or Event Infor | nation | | | | |
| | Does the agency have a tick | et policy? Yes [| ⊠ No 🗆 📑 | ace Value of I | Each Ticket/Pass \$ $\frac{75}{}$ |) |
| | Event Description: Sugarlan | d Concert @ SDCF Provide Title/ Explai | nation | Date(s) | , 02 , 18 | // |
| | Ticket(s)/Pass(es) provided | · · | ⊠ No 🗆 If | f no: | Name of Source | |
| | Was ticket distribution made | at the hehest Voc. | או או דיי וו | ves: Haydu, | Lee Official's Name (Last, First) | |
| | of agency official? | at the bollest 168 [| ☑ NO□ | , , | Official's Name (Last, First) | |
| 3. | • Use Section A to identify the agen A. Name of Agency, Depart | | Use Section B to i | T T | | ify an outside organization. |
| | | nder engal kan aya kan anga makin kan kan ana aya kan ana an | | • | | |
| | | | | | | |
| | B. Name of Indi (Last, Fir | | Number of Ticket(s)/ Passes | | Identify one of the f | ollowing: |
| | Haydu, Lee | | 4 | 5.3b) the off | nonial Role Other wing "Ceremonial Role" or "Other" des icial and/or job duties wer attendance at the e | - scribe below: of the District Official |
| | | | | | nonial Role Other Called O | _ |
| | C. Name of Outside O (include address and | - | Number of Ticket(s)/ Passes | Describe th | e public purpose made pur | suant to the agency's policy |
| | | | | | | |
| | | | | | | |
| 4. | Verification I have read and understand FP with the requirements | PC Regulations 18944 | 1.1 and 18942. | I have verified t | that the distribution set fo | orth above, is in accordance |
| | TIPOI . | | | | 250/0 | 00/00/40 |
| | 10/00/1/14/ | | ny J. Fennell | | CEO/General Managei | r 09/26/18 |

| Agency Name | | | | Date Stamp | California 802 |
|---|------------------------|-----------------------------------|---------------------------------------|---|---|
| 22nd District Agricultural Association | | | | | 1 OIIII |
| Division, Department, or Region (if application) | able) | | · · · · · · · · · · · · · · · · · · · | | For Official Use Only |
| CDFA | | | | | |
| Designated Agency Contact (Name, Title) | | | | | |
| Timothy J. Fennell | | | | Amendment (Must | Provide Explanation in Part 3.) |
| Area Code/Phone Number E-mail | | | | | |
| 858-755-1161 | | | | Date of Original Filing | :(month, day, year) |
| Function or Event Information | | | | | 10 |
| Does the agency have a ticket policy? | Yes [| ⊠ No□ F | ace Value of l | Each Ticket/Pass \$ £ | 10 |
| Event Description: Little Big Town @ 5 | SDCF de Title/Expla | netion | eate(s) | <u>, 15 , 18</u> | / |
| Ticket(s)/Pass(es) provided by agency | , | | no: | | |
| | | | yes: <u>Haydu,</u> | Name of Source | |
| Was ticket distribution made at the bel of agency official? | nest Yes[| ⊠ No□ ^{If} | yes: Tlaydu, | Official's Name (Last, Firs. | *) |
| Recipients • Use Section A to identify the agency's department | nt or unit. • | Use Section B to i | dentify an individ | ual. • Use Section C to ide | ntify an outside organization. |
| A. Name of Agency, Department or Un | it | Number of Ticket(s)/ Passes | Describé th | e public purpose made p | ursuant to the agency's policy |
| | | | | | |
| All and the state of the state | | Number | 1.4 | | |
| B. Name of Individual (Last, First) | | of Ticket(s)/ Passes | | Identify one of the | o following: |
| Haydu, Lee | | 6 | f check 5.3b) the off | nonial Role Other King "Ceremonial Role" or "Other" icial and/or job dutie ner attendance at the | describe below: s of the District Official |
| | | | Ceren | nonial Role Other Other | Income |
| C. Name of Outside Organization (include address and description) | | Number of Ticket(s)/ Passes | Describe th | e public purpose made p | ursuant to the agency's policy |
| | | | | | |
| Verification | House 400 t | 14 and 150 10 | Library and the first | that the attacket to | South above to the |
| I have read and understand FPPC Regula with the requirements. | uons 18944 | 1.1 and 18942. | ı nave verified | tnat the distribution set | тогтп above, is in accordan |
| -41-011 | | | | | |
| 1 Punll | Timoth | ny J. Fennell | (| CEO/General Manag | er 09/26/18 |

| Agency Name | | | | Date Stamp | California 802 |
|---|----------------------------|--|---|--|---|
| 22nd District Agricultural Ass | oclation | | | | |
| Division, Department, or Regio | on (if applicable) | | | | For Official Use Only |
| CDFA | | | | | |
| Designated Agency Contact (/ | Name, Title) | | | | |
| Timothy J. Fennell, CEO | | | | Amendment (Must | Provide Explanation in Part 3.) |
| Area Code/Phone Number | E-mail | | | | |
| 858-755-1161 | | | | Date of Original Filing | (month, day, year) |
| Function or Event Inforn | nation | | | | |
| Does the agency have a tick | et policy? Yes | ⊠ No □ F | ace Value of | Each Ticket/Pass \$ _ | 19 |
| Event Description: 2018 San | Diego County Fair | | | 01 18 | |
| Ticket(s)/Pass(es) provided by | • | ⊠ No□ I | no: | Name of Source | Malana dan sasah menerala sasah |
| Was ticket distribution made of agency official? | at the behest Yes | ⊠ No□ ^I | f yes: Mead, I | Kathlyn Official's Name (Last, First |) |
| Recipients • Use Section A to identify the agence | ry's denartment or unit | • Use Section R to | identify an individ | ual • Use Section C to ide | ntify an aytside arganization |
| - Ose Section 11 to Identify the agenc | | Number | | dui. Osc section o to rec | miny an outside organization. |
| A. Name of Agency, Depar | rtment or Unit | of Ticket(s)/ Passes | Describe th | e public purpose made pu | ursuant to the agency's policy |
| | | F #5585 | | | |
| B. Name of Indiv | | Number of Ticket(s)/ | | Identify one of the | following: |
| | | Number of Ticket(s)/ | 5.3a)Perform | nonial Role Other ding "Ceremonial Role" or "Other" on ance of a ceremonial | Income [describe below: al role as Board Member |
| (Last, Firs | | Number of Ticket(s)/ Passes | 5.3a)Perform representing Cerer if chec 5.3b) the off | nonial Role Other ding "Ceremonial Role" or "Other" or nance of a ceremonial the Board of Director nonial Role Other ding "Ceremonial Role" or "Other" | Income describe below: al role as Board Member ors for the 22nd DAA Income describe below: s of the District Official |
| (Last, Firs | ganization | Number of Ticket(s)/ Passes | 5.3a)Perform representing Cerer if chec 5.3b) the off require her a | nonial Role Other day "Ceremonial Role" or "Other" or nance of a ceremonia the Board of Directo nonial Role Other day "Ceremonial Role" or "Other" or cial and/or job duties attendance at the eve | Income describe below: al role as Board Member ors for the 22nd DAA Income describe below: s of the District Official |
| Mead, Kathlyn C. Name of Outside Or (include address and | ganization | Number of Ticket(s)/ Passes 25 | 5.3a)Perform representing Cerer if chec 5.3b) the off require her a | nonial Role Other day "Ceremonial Role" or "Other" or nance of a ceremonia the Board of Directo nonial Role Other day "Ceremonial Role" or "Other" or cial and/or job duties attendance at the eve | Income describe below: al role as Board Member ors for the 22nd DAA Income describe below: a of the District Official ent. |
| (Last, Firs | ganization description) | Number of Ticket(s)/ Passes 25 Number of Ticket(s)/ Passes | 5.3a)Perform representing Ceremond of the control | nonial Role Other ding "Ceremonial Role" or "Other" of nance of a ceremonia the Board of Directo nonial Role Other ding "Ceremonial Role" or "Other" clal and/or job duties attendance at the eve | Income describe below: al role as Board Member ors for the 22nd DAA Income describe below: a of the District Official ent. Income describe below: a of the describe below: b of the describe below: a of the describe below: |

| Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions | | A Public Doc | ument |
|--|------------|--------------------|-------|
| 1. Agency Name | Date Stamp | California Form | 802 |
| 22nd District Agricultural Association | | Form | |

| ١. ، | Agency Name | | | | Date Stamp | California 802 |
|------|--|-------------------------------|-----------------------------------|--|--|---|
| | 22nd District Agricultural Ass | | | |] | Form OUZ For Official Use Only |
| | Division, Department, or Region | on (if applicable) | | | | For Official Use Only |
| | CDFA | | | | | |
| | Designated Agency Contact (/ | lame,Title) | | | | |
| | Timothy J. Fennell | | | | Amendment (Must F | Provide Explanation in Part 3.) |
| - | Area Code/Phone Number | E-mail | | | , | , |
| | 858-755-1161 | | | | Date of Original Filing: | (month, day, year) |
| ≥. | Function or Event Inforn | nation | | · · · · · · · · · · · · · · · · · · · | | , |
| | Does the agency have a tick | et policy? Yes | ⊠ No 🗆 📑 | ace Value of | Each Ticket/Pass \$ 7 | 3 |
| | Event Description: Sugarland | d Concert @ SDCF | | pate(s) 06 | <u>, 02 , 18 </u> | · · · · · · · · · · · · · · · · · · · |
| | | Provide Title/Expla | nation | | | |
| | Ticket(s)/Pass(es) provided I | oy agency? Yes | ☑ No 🗆 🍴 | f no: | Name of Source | |
| | Maa tiakat diatrikutian naada | of the behavior | | f yes: Mead, ł | Name of Source Sathlyn | |
| | Was ticket distribution made of agency official? | at the benest Yes | 집 No니 " | yes | Official's Name (Last, First) | Att Township to the street of |
| | or agency official? | | | | | |
| 3. | Recipients | | | | | |
| | • Use Section A to identify the agenc | y's department or unit. • | Use Section B to | identify an individ | lual. • Use Section C to iden | tify an outside organization. |
| | A. Name of Agency, Depar | tment or Unit | Number of Ticket(s)/ Passes | Describe th | ne public purpose made pu | rsuant to the agency's policy |
| | | | 1 40000 | | | |
| | | | | | | |
| | | | | <u> </u> | | |
| | | | | | | |
| | B. Name of Indiv | | Number of Ticket(s)/ | | Identify one of the | following: |
| | (Last, Firs | () | Passes | | | |
| | Mead, Kathlyn | | | Ceren | nonial Role Other Other Other | |
| | | | 7 | | ficial and/or job duties | |
| | <u> </u> | ····· | | require his/h | ner attendance at the o | event. |
| | | | | 1 | nonial Role Other Other | |
| | | | | II CHEC | king "Ceremonial Role" or "Other" de | iscribe pelow; |
| | | | Number | | | |
| | C. Name of Outside Or (include address and | | of Ticket(s)/ Passes | Describe th | ne public purpose made pui | rsuant to the agency's policy |
| | | | | | | |
| | , | | ļ | | | |
| | | | | | | |
| | | Special Commission Commission | <u> </u> | | ······································ | |
| l. | Verification | | | | | |
| | I have read and understand FPI | PC Regulations 18944 | 1.1 and 18942. | I have verified | that the distribution set f | orth above, is in accordance |
| | with the requirements. | | | | | |
| es, | Jennell | | ny J. Fennell | | CEO/General Manage | er 09/26/18 |
| | Signatures Agency Head or Designation | ee P | rint Name | | Title | (month, day, year) |
| / | Comment: | | | | | |
| | Continue. | | | | tana tanan ara-ara-ara-ara-ara-ara-ara-ara-ara-ara | |

| Agency Name | | Date Stan | |
|---|-----------------------------------|--|---|
| 22nd District Agricultural Association | | | . 01.11 |
| Division, Department, or Region (If applicable) | | | For Official Use Only |
| CDFA | | | : |
| Designated Agency Contact (Name, Title) | | | |
| Timothy J. Fennell | | Amendmen | t (Must Provide Explanation in Part 3.) |
| Area Code/Phone Number E-mail | | | |
| 858-755-1161 | | Date of Origina | Filing: (month, day, year) |
| Function or Event Information | | | |
| Does the agency have a ticket policy? Yes | s⊠ No□ F | ace Value of Each Ticket/Pa | ss \$ <u>40</u> |
| Event Description: Little Big Town @ SDCF | г | Pate(s) 06 / 15 / 18 | |
| Provide Title/Exp | olanation | | |
| Ticket(s)/Pass(es) provided by agency? Yes | s⊠ No□ II | no: | |
| Was ticket distribution made at the behest Yes | | yes: Mead, Kathlyn | |
| of agency official? | s⊠ No∐ " | Official's Name (Li | ast, First) |
| or agonoy omelan | | | |
| Recipients | | | |
| • Use Section A to identify the agency's department or unit. | | dentify an individual. • Use Section | C to identify an outside organization. |
| A. Name of Agency, Department or Unit | Number of Ticket(s)/ | Describe the public purpose r | nade pursuant to the agency's policy |
| | Passes | | |
| | | | |
| | | | www.dovti. |
| | | | |
| | Number | | |
| B. Name of Individual (Last, First) | of Ticket(s)/ Passes | Identify on | e of the following: |
| | | Ceremonial Role | |
| Mood Kathlyn | | Octomorna Moto | Other 🔀 Income |
| Mead, Kathlyn | 6 | If checking "Ceremonial Role" o | r "Other" describe below: |
| Mead, Kathlyn | 6 | If checking "Ceremonial Role" o | r "Other" describe below: duties of the District Official |
| Mead, Kathlyn | 6 | If checking "Ceremonial Role" of 5.3b) the official and/or job | r "Other" describe below: duties of the District Official |
| Mead, Kathlyn | 6 | f checking "Ceremonial Role" of 5.3b) the official and/or job require his/her attendance | r "Other" describe below: duties of the District Official at the event. Other \(\square\) Income |
| Mead, Kathlyn | | f checking "Ceremonial Role" of 5.3b) the official and/or job require his/her attendance Ceremonial Role | r "Other" describe below: duties of the District Official at the event. Other \(\square\) Income |
| Name of Outside Organization | Number of Ticket(s)/ | f checking "Ceremonial Role" of 5.3b) the official and/or job require his/her attendance Ceremonial Role If checking "Ceremonial Role" of the checking "Ceremonial Role" of t | r "Other" describe below: duties of the District Official at the event. Other \(\sum_\) Income r "Other" describe below: |
| Name of Outside Organization | Number | f checking "Ceremonial Role" of 5.3b) the official and/or job require his/her attendance Ceremonial Role If checking "Ceremonial Role" of the checking "Ceremonial Role" of t | r "Other" describe below: duties of the District Official at the event. Other ☐ Income r "Other" describe below: |
| Name of Outside Organization | Number of Ticket(s)/ | f checking "Ceremonial Role" of 5.3b) the official and/or job require his/her attendance Ceremonial Role If checking "Ceremonial Role" of the checking "Ceremonial Role" of t | r "Other" describe below: duties of the District Official at the event. Other ☐ Income r "Other" describe below: |
| Name of Outside Organization | Number of Ticket(s)/ | f checking "Ceremonial Role" of 5.3b) the official and/or job require his/her attendance Ceremonial Role If checking "Ceremonial Role" of the checking "Ceremonial Role" of t | r "Other" describe below: duties of the District Official at the event. Other ☐ Income r "Other" describe below: |
| Name of Outside Organization | Number of Ticket(s)/ | f checking "Ceremonial Role" of 5.3b) the official and/or job require his/her attendance Ceremonial Role If checking "Ceremonial Role" of the checking "Ceremonial Role" of t | r "Other" describe below: duties of the District Official at the event. Other \(\sum_\) Income r "Other" describe below: |
| C. Name of Outside Organization (include address and description) | Number of Ticket(s)/ | f checking "Ceremonial Role" of 5.3b) the official and/or job require his/her attendance Ceremonial Role If checking "Ceremonial Role" of the checking "Ceremonial Role" of t | r "Other" describe below: duties of the District Official at the event. Other \(\sum_\) Income r "Other" describe below: |
| C. Name of Outside Organization (include address and description) Verification | Number of Ticket(s)/ Passes | f checking "Ceremonial Role" of 5.3b) the official and/or job require his/her attendance Ceremonial Role If checking "Ceremonial Role" of the public purpose in the public pu | r "Other" describe below: duties of the District Official at the event. Other |
| C. Name of Outside Organization (include address and description) Verification I have read and and anderstand FPPC Regulations 189 | Number of Ticket(s)/ Passes | f checking "Ceremonial Role" of 5.3b) the official and/or job require his/her attendance Ceremonial Role If checking "Ceremonial Role" of the public purpose in the public pu | r "Other" describe below: duties of the District Official at the event. Other |
| C. Name of Outside Organization (include address and description) Verification I have read and anderstand FPPC Regulations 189 with the requirements. | Number of Ticket(s)/ Passes | f checking "Ceremonial Role" of 5.3b) the official and/or job require his/her attendance Ceremonial Role If checking "Ceremonial Role" of the public purpose in the public pu | r "Other" describe below: duties of the District Official at the event. Other ☐ Income r "Other" describe below: nade pursuant to the agency's policy on set forth above, is in accordan |

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

| 1. Agency Name | | | Date Stamp | California Q02 |
|--|---|--|--|---------------------------------|
| 22nd District Agricultural Association | | | | Form OUZ |
| Division, Department, or Region (If applicable) | Warran Maddani an | | | For Official Use Only |
| CDFA | | | | |
| Designated Agency Contact (Name, Title) | | | 1 | |
| Timothy J. Fennell, CEO | | | Amandment /Must | Provide Explanation In Part 3.) |
| Area Code/Phone Number E-mail | | ······································ | Amendment (Mast | Frovide Explanation in Fait 3.) |
| 858-755-1161 | | | Date of Original Filing | (month, day, year) |
| 2. Function or Event Information | | | | |
| | | Food Value of | Each Ticket/Pass \$ _1 | 19 |
| | | | | |
| Event Description: 2018 San Diego County Fair | · [| Date(s) <u>06</u> | <u>, 01 , 18</u> | <u>07 , 04 , 18</u> |
| Provide Title/ Exploration Ticket(s)/Pass(es) provided by agency? Yes | | f no: | | |
| Ticket(s)/1 ass(es) provided by agency: | ⊠ No □ II | 1110. | Name of Source | |
| Was ticket distribution made at the behest Yes | ⊠ No□ It | f yes: <u>Pennim</u> | an, Russ Official's Name (Last, First, | |
| of agency official? | | | Official's Name (Last, First, |) . |
| | | | | |
| 3. Recipients• Use Section A to identify the agency's department or unit. | A Tina Cantina D to 1 | | lood Allon Continu Ct. His | |
| Ose Section A to identify the agency's department or unit. | Number | T | iuai. • Use Section C to ide | itily an outside organization. |
| A. Name of Agency, Department or Unit | of Ticket(s)/ | Describe th | ne public purpose made pu | ursuant to the agency's policy |
| | Passes | | | |
| | | | | |
| | • | | | |
| | | · | | |
| | Number | | | |
| B. Name of Individual (Last, First) | of Ticket(s)/ Passes | | Identify one of the | following: |
| | 7 40000 | Ceren | monial Role Other | Income |
| Penniman, Russ | 24 | If chec | king "Ceremonial Role" or "Other" o | describe below: |
| | 4.7 | | mance of a ceremonia g the Board of Directo | al role as Board Member |
| | | | monial Role Other | |
| | | If chec | king "Ceremonial Role" or "Other" o | describe below: |
| | | | icial and/or job duties attendance at the eve | of the District Official |
| Name of Outside Organization | Number | | | |
| C. (include address and description) | of Ticket(s)/ Passes | Describe th | ne public purpose made pu | ursuant to the agency's policy |
| <u>and the second of the second </u> | | | | |
| | | | | , |
| programme and the second secon | | | | <u> </u> |
| | | | | |
| 4. Verification | | -I | | |
| I have read and understand FPPC Regulations 1894 | 4.1 and 18942 | I have verified | that the distribution set | forth above is in accordance |
| with the requirements. | 100 12. | | are arearwader out | aporo, io in accordance |
| Timot | hy J. Fennell | · | CEO/General Manag | er 09/26/18 |
| | Print Name | | Title | (month, day, year) |
| | | | | |
| Comment: | | | | |

Agency Report of:

| C | eremoniai Role Even | ts and licket/Pa | ass Distri | putions | | A Public D | ocument |
|----|---|--|---------------------------------------|--|---|--|-------------------------|
| ١. | Agency Name | | | ······································ | Date Stamp | Californ | ia 802 |
| | 22nd District Agricultural As | sociation | | | | Form | 002 |
| | Division, Department, or Regi | | | · · · · · · · · · · · · · · · · · · · | | For Offic | cial Use Only |
| | CDFA | | | | | | |
| | Designated Agency Contact (| Name Title) | | | | | |
| | | rvamo, ruoj | | | | | |
| | Timothy J. Fennell | [pr :1] | | | Amendment (Me | ust Provide Explanatio | on in Part 3.) |
| | Area Code/Phone Number | E-mail | | | | | |
| | 858-755-1161 | | | | Date of Original Fili | ng:(month, day, | year) |
| 2. | Function or Event Infor | mation | | , | | | |
| | Does the agency have a tick | cet policy? Yes [| ⊠ No□ F | ace Value of | Each Ticket/Pass \$ | 3 40 | |
| | Event Description: Little Big | Town @ SDCF | D | ate(s)06 | <u>, 15 , 18</u> | / | |
| | · | Provide Title/Explan | nation | | | | |
| | Ticket(s)/Pass(es) provided | by agency? Yes [| ☑ No□ If | no: | Name of Source | | - |
| | | (1) (| IE | Pennim | an. Russ | | |
| | Was ticket distribution made | at the benest Yes | No □ " | yes. | an, Russ Official's Name (Last, F | irst) | |
| | of agency official? | | | | | | |
| 3. | Recipients • Use Section A to identify the agen | cy's department or unit. • | Use Section B to i | dentify an individ | fual. • Use Section C to | identify an outside o | rganization. |
| | A. Name of Agency, Depa | artment or Unit | Number of Ticket(s)/ Passes | Describe th | ne public purpose made | pursuant to the aç | jency's policy |
| | | | | | | | |
| | | | | | | | |
| | B. Name of Indi (Last, Fir | | Number of Ticket(s)/ Passes | | Identify one of | the following: | |
| | Penniman, Russ | | 2. | f chec 5.3b) the off | nonial Role Oth king "Ceremonial Role" or "Oth ficial and/or job dut ner attendance at tl | ies of the Distri | Income ☐ ct Official |
| | | | | | monial Role Oth king "Ceremonial Role" or "Oth | | Income 🗔 |
| | C. Name of Outside O (include address and | | Number of Ticket(s)/ Passes | Describe th | ne public purpose made | pursuant to the ac | jency's policy |
| | No. 1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (| | | | | Market and the parties of the partie | and the second |
| | | | | | | | |
| 4. | Verification I have read and understand FF | PC Regulations 18944 | .1 and 18942. | l have verified | that the distribution s | set forth above, is | s in accordance |
| N | with the requirements. | 1// | | | | | |
| | Humen | | y J. Fennell | | CEO/General Man | | 09/26/18 |
| | Signature ph/gency Head or Design | nee Pi | rint Name | | Title | (1 | month, day, year) |
| | dommant | | | | | | |
| | ¢omm∉nt: | A CONTRACTOR OF THE CONTRACTOR | · · · · · · · · · · · · · · · · · · · | ************************************** | | <u></u> | |

| | gency Report of: eremonial Role Events and Ticket/P | ass Distr | ibutions | . Δ | Public Document | |
|----|---|---------------------------------------|-----------------------|--|--|--|
| - | Agency Name | | | Date Stamp | | |
| | 22nd District Agricultural Association | | | , | Form 802 | |
| | Division, Department, or Region (if applicable) | · · · · · · · · · · · · · · · · · · · | | 1 | For Official Use Only | |
| | CDFA | | | | | |
| | Designated Agency Contact (Name, Title) | | | | | |
| | Timothy J. Fennell | | | Amondment (M. / S | Land to the Day of the | |
| | Area Code/Phone Number E-mail | | | Amendment (wust P. | rovide Explanation in Part 3.) | |
| | 858-755-1161 | | | Date of Original Filing: . | (month, day, year) | |
| 2. | Function or Event Information | | | | | |
| | Does the agency have a ticket policy? Yes I | ⊠ No 🗆 🕛 | Face Value of | Each Ticket/Pass \$ 40 |) | |
| | Event Description: Larry the Cable Guy @ SDC | nation | Date(s) <u>06</u> | <u></u> | | |
| | · · | ⊠ No 🗆 🛚 I | If no: | Name of Source | | |
| | Was ticket distribution made at the behest Yes of agency official? | ĭ No□ ^I | If yes: <u>Pennim</u> | an, Russ Official's Name (Last, First) | | |
| 3. | Recipients • Use Section A to identify the agency's department or unit. | Use Section B to | identify an individ | lual. • Use Section C to ident | tify an outside organization. | |
| | A. Name of Agency, Department or Unit | Number of Ticket(s)/ Passes | Describe th | ne public purpose made pur | suant to the agency's policy | |
| | | | | · · · · · · · · · · · · · · · · · · · | | |
| | B. Name of Individual (Last, First) | Number of Ticket(s)/ Passes | | Identify one of the f | ollowing: | |
| | Penniman, Russ | 2 | 5.3b) the off | nonial Role Other Manage Ceremonial Role or "Other" deficial and/or job duties | scribe below: of the District Official | |

| 4 | V۵ | rifi | ca | ti | ۸ı | 1 |
|-----------|----|------|----|----|----|---|
| 4. | VE | | ua | LI | O1 | 1 |

C.

Name of Outside Organization (include address and description)

| I have read and understand FF | PPC Regulations | 18944.1 and | 18942. I have | verified that the | distribution set fort | h above, is ir | n accordance |
|-------------------------------|-----------------|-------------|---------------|-------------------|-----------------------|----------------|--------------|
| with the requirements | 112 | | | | | | |

Number of Ticket(s)/ Passes

| inth the requirements | | | |
|--------------------------------------|-------------------|---------------------|--------------------|
| The well T | imothy J. Fennell | CEO/General Manager | 09/26/18 |
| Signature of Agency Head or Designee | Print Name | Title | (month, day, year) |

Income \Box

Other 🔲

Describe the public purpose made pursuant to the agency's policy

If checking "Ceremonial Role" or "Other" describe below:

Ceremonial Role

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions 1. Agency Name A Public Document

| ι. | Agency Name | | | | Date Stamp | Form 802 |
|----|---|---------------------------------------|-------------------------|--|--|-----------------------------------|
| | 22nd District Agricultural As | | | | _ | For Official Use Only |
| | Division, Department, or Reg | ion (if applicable) | | | | |
| | CDFA | 7111 | | ······································ | _ | |
| | Designated Agency Contact | Name, i itie) | | | | |
| | Timothy J. Fennell | | | | Amendment (Mus | t Provide Explanation in Part 3.) |
| | Area Code/Phone Number | E-mail | | | Data of Outubert Filling | |
| | 858-755-1161 | | | | Date of Original Filing | (month, day, year) |
| 2. | Function or Event Infor | mation | | | | |
| | Does the agency have a tick | ket policy? Yes | ⊠ No□ F | ace Value of | Each Ticket/Pass \$. | 20 |
| | Event Description: The Fray | • | | | , 27 , 18 | |
| | Event Description. | Provide Title/ Expla | nation | Jaie(5) | a/ | |
| | Ticket(s)/Pass(es) provided | by agency? Yes | ⊠ No 🗆 If | f no: | | |
| | | | 14 | f yes: Pennim | Name of Source nan. Russ | |
| | Was ticket distribution made | e at the benest Yes | ⊠ No 🗆 '' | ı yes | Official's Name (Last, Firs | st) |
| | of agency official? | | | | | |
| 3. | Recipients | | | | | |
| | • Use Section A to identify the agen | cy's department or unit. | Use Section B to | identify an indivi | dual. • Use Section C to ide | entify an outside organization. |
| | Δ Name of Agency, Depa | ertment or Unit | Number | Describe th | ne nublic nurnose made n | oursuant to the agency's policy |
| | A. Name of Agency, Depa | artification of the | of Ticket(s)/ Passes | Describe tr | ne public purpose made p | disdant to the agency a policy |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | North Control of the | | | | | |
| | B. Name of Ind | | Number of Ticket(s)/ | | Identify one of th | e following: |
| | | | Passes | Cava | monial Role Other | ⊠ Income □ |
| | Penniman, Russ | | 4 | If chec | cking "Ceremonial Role" or "Other" | describe below: |
| | | | - | | ficial and/or job dutie her attendance at the | es of the District Official |
| | | · · · · · · · · · · · · · · · · · · · | | <u> </u> | monial Role Other | |
| | | | | | cking "Ceremonial Role" or "Other | |
| | | | | | | |
| | Name of Outside O | rganization | Number | | | |
| | C, (include address and | . • | of Ticket(s)/ Passes | Describe ti | ne public purpose made p | oursuant to the agency's policy |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 4. | Verification | | | | | |
| | I have read and understand FF | PPC Regulations 1894 | 4.1 and 18942. | I have verified | that the distribution se | t forth above, is in accordance |
| | with the requirements. | li) | | | | |
| | 1 Klunds | | hy J. Fennell | | CEO/General Manaç | ger 09/26/18 |
| | Signatule of Agency Head or Design | nee | Print Name | | Title | (month, day, year) |
| | Comment: | | | | | |
| | 1 y | | | | | |

Comment:

| Ceremonial Role Events ar | | 0.00 210111 | Dations | | <u> Public Documen</u> | | |
|---|--|-----------------------------------|---|--|---|--|--|
| . Agency Name | | | | Date Stamp | California 802 | | |
| 22nd District Agricultural Associat | on | | | | | | |
| Division, Department, or Region (if a | pplicable) | | | | For Official Use Only | | |
| CDFA | | | | | | | |
| Designated Agency Contact (Name, | Title) | | | | | | |
| Timothy J. Fennell, CEO | | | | Amendment (Must | I. Provide Explanation in Part 3.) | | |
| Area Code/Phone Number E-ma | I | | *************************************** | Anonanon (Mastr | Tovido Explanation III T alt 5.) | | |
| 858-755-1161 | | | | Date of Original Filing: | (month, day, year) | | |
| Function or Event Information | | | | | | | |
| Does the agency have a ticket pol | icy? Yes | ⊠ No□ F | ace Value of | Each Ticket/Pass \$ _1 | 9 | | |
| Event Description: 2018 San Dieg | | | | <u>, 01 , 18</u> | 07 / 04 / 18 | | |
| Ticket(s)/Pass(es) provided by ag | | | · no· | | | | |
| ricket(e)/r des(es) provided by dg | 5// 0 // 103 | | | Name of Source | | | |
| Was ticket distribution made at the | behest Yes | ⊠ No□ ^{If} | yes: Sleimar | 1, Pierre Official's Name (Last, First) | | | |
| of agency official? | | | | Omolars Warne (Last, 1 11st) | , | | |
| B. Recipients • Use Section A to identify the agency's dep | artment or unit. | | dentify an individ | lual. • Use Section C to ide | ntify an outside organization. | | |
| A. Name of Agency, Department | or Unit | Number of Ticket(s)/ Passes | Describe th | e public purpose made pu | irsuant to the agency's policy | | |
| | ······································ | | | | | | |
| B. Name of Individual (Last, First) | | Number of Ticket(s)/ Passes | | Identify one of the | following: | | |
| Slelman, Pierre | | 35 | 5.3a)Perform | nonial Role | describe below: al role as Board Member | | |
| | | | Ceren If chec 5.3b) the off | nonial Role Other Manager Ceremonial Role of "Other" of | Income lescribe below: of the District Official | | |
| C. Name of Outside Organiza (include address and descri | | Number of Ticket(s)/ Passes | Describe th | e public purpose made pu | ursuant to the agency's policy | | |
| | | | | | | | |
| I. Verification | | | | | | | |
| I have read and understand FPPC Rewith the requirements. | gulations 1894 | 4.1 and 18942. | l have verified | that the distribution set | forth above, is in accordan | | |
| THE KOLL OF | T! 4 | I (*** | , | CEO/Conoral Manage | 00/06/49 | | |
| WW/MW// | Timoti | hy J. Fennell | , | CEO/General Manage | er 09/26/18 | | |

| Agency Name | | | | Date Stamp | California 000 |
|--|---------------------------------------|---|--|---|---|
| 22nd District Agricultural Association | | | | | Form 802 |
| Division, Department, or Region (if applica | able) | | | | For Official Use Only |
| CDFA | | | | | |
| Designated Agency Contact (Name, Title) | · · · · · · · · · · · · · · · · · · · | | | | |
| Timothy J. Fennell | | | | Amendment (M | flust Provide Explanation in Part 3.) |
| Area Code/Phone Number E-mail | | | | | |
| 858-755-1161 | | | | Date of Original Fil | ing:(month, day, year) |
| Function or Event Information | | | | | 40 |
| Does the agency have a ticket policy? | Yes 🗵 | No□ F | ace Value of | Each Ticket/Pass | \$ 40 |
| Event Description: Larry the Cable Gu | y @ SDCF | D | ate(s)06 | <u>/ 16 / 18</u> | . 1 1 |
| Provid | de Title/Explana | tion | | | |
| Ticket(s)/Pass(es) provided by agency | ′? Yes 🛭 | a | no: | Name of Source | · · · · · · · · · · · · · · · · · · · |
| Was ticket distribution made at the bel | nest yes 🗵 | l No.□ If | yes: Sleimar | n, Pierre | |
| of agency official? | 100 | 1 110 🗀 | • | Official's Name (Last, I | First) |
| | | AA | | and the second of the second | |
| Recipients | unt an vinit A T | laa Caatian D ta i | dansibran indivi | lwal . • Itaa Caatlan C ta | Identifican autolde aucaulustian |
| • Use Section A to identify the agency's departme | ent or unit. | Number | T THE THE THE THE TENT | idal. • Ose Section C to | identity an outside organization. |
| A. Name of Agency, Department or Un | iit | of Ticket(s)/ Passes | Describe th | e public purpose made | e pursuant to the agency's policy |
| | | | | | |
| | | 1 40505 | | | |
| | | 1 40000 | | | |
| | | Tuoses | | | |
| | | 1 45555 | | | |
| B. Name of Individual (Last, First) | | Number of Ticket(s)/ Passes | | Identify one of | the following: |
| (Last, First) | | Number of Ticket(s)/ | 1 | nonial Role Oth | ner 🗵 Income |
| Seef 1 | | Number of Ticket(s)/ | If chec | nonial Role Oth | ner 🗵 Income |
| (Last, First) | | Number of Ticket(s)/ Passes | 5.3b) the of | nonial Role Oth | ner 🗵 Income ner describe below: ties of the District Official |
| (Last, First) | | Number of Ticket(s)/ Passes | 5.3b) the of require his/k | nonial Role Oth king "Ceremonial Role" or "Oth icial and/or job du ner attendance at t nonial Role Oth | ner ⊠ Income her" describe below: ties of the District Official che event. Income |
| (Last, First) | | Number of Ticket(s)/ Passes | 5.3b) the of require his/k | nonial Role Oth king "Ceremonial Role" or "Oth icial and/or job dui ner attendance at t | ner ⊠ Income her" describe below: ties of the District Official che event. Income |
| (Last, First) | | Number of Ticket(s)/ Passes 4 | 5.3b) the of require his/k | nonial Role Oth king "Ceremonial Role" or "Oth icial and/or job du ner attendance at t nonial Role Oth | ner ⊠ Income her" describe below: ties of the District Official che event. Income |
| (Last, First) Sleiman, Pierre Name of Outside Organization | | Number of Ticket(s)/ Passes 4 | If chec | nonial Role Oth king "Ceremonial Role" or "Oth icial and/or job du' ner attendance at t nonial Role Oth king "Ceremonial Role" or "Oth | ner⊠ Income her describe below: ties of the District Official che event. ner □ Income |
| (Last, First) Sleiman, Pierre | | Number of Ticket(s)/ Passes 4 | If chec | nonial Role Oth king "Ceremonial Role" or "Oth icial and/or job du' ner attendance at t nonial Role Oth king "Ceremonial Role" or "Oth | ner⊠ Income her' describe below: ties of the District Official che event. her □ Income her' describe below: |
| (Last, First) Sleiman, Pierre Name of Outside Organization | | Number of Ticket(s)/ Passes 4 | If chec | nonial Role Oth king "Ceremonial Role" or "Oth icial and/or job du' ner attendance at t nonial Role Oth king "Ceremonial Role" or "Oth | ner⊠ Income her' describe below: ties of the District Official che event. her □ Income her' describe below: |
| (Last, First) Sleiman, Pierre Name of Outside Organization | | Number of Ticket(s)/ Passes 4 | If chec | nonial Role Oth king "Ceremonial Role" or "Oth icial and/or job du' ner attendance at t nonial Role Oth king "Ceremonial Role" or "Oth | ner⊠ Income her' describe below: ties of the District Official che event. her □ Income her' describe below: |
| (Last, First) Sleiman, Pierre Name of Outside Organization | | Number of Ticket(s)/ Passes 4 | If chec | nonial Role Oth king "Ceremonial Role" or "Oth icial and/or job du' ner attendance at t nonial Role Oth king "Ceremonial Role" or "Oth | ner⊠ Income her' describe below: ties of the District Official che event. her □ Income her' describe below: |
| C. Name of Outside Organization (include address and description) | | Number of Ticket(s)/ Passes 4 | If chec | nonial Role Oth king "Ceremonial Role" or "Oth icial and/or job du' ner attendance at t nonial Role Oth king "Ceremonial Role" or "Oth | ner⊠ Income her' describe below: ties of the District Official che event. her □ Income her' describe below: |
| C. Name of Outside Organization (include address and description) Verification | | Number of Ticket(s)/ Passes 4 Number of Ticket(s)/ Passes | 5.3b) the off require his/b Cerer If chec | nonial Role Oth king "Ceremonial Role" or "Oth ricial and/or job du' ner attendance at t nonial Role Oth king "Ceremonial Role" or "Oth | Income her less of the District Official the event. The less of the District Official the event. The less of the District Official the event. The less of the District Official the event. |
| (Last, First) Sleiman, Pierre C. Name of Outside Organization (include address and description) Verification I have read and understand FPPC Regular | | Number of Ticket(s)/ Passes 4 Number of Ticket(s)/ Passes | 5.3b) the off require his/b Cerer If chec | nonial Role Oth king "Ceremonial Role" or "Oth ricial and/or job du' ner attendance at t nonial Role Oth king "Ceremonial Role" or "Oth | Income her less of the District Official the event. The less of the District Official the event. The less of the District Official the event. The less of the District Official the event. |
| C. Name of Outside Organization (include address and description) Verification | tions 18944. | Number of Ticket(s)/ Passes 4 Number of Ticket(s)/ Passes | 5.3b) the off require his/h Cerer If chec | nonial Role Oth king "Ceremonial Role" or "Oth ricial and/or job du' ner attendance at t nonial Role Oth king "Ceremonial Role" or "Oth | Income her' describe below: ties of the District Official the event. The Uncome her' describe below: The pursuant to the agency's policy set forth above, is in accordance. |

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions **A Public Document** 1. Agency Name California O O O

| | 22nd District Agricultural Ass | | | | , , | Form 802 |
|----|--|---|--|--|--|-------------------------------|
| | Division, Department, or Regi | ion (if applicable) | | | | For Official Use Only |
| | CDFA | | ************************************** | |] | |
| | Designated Agency Contact (| Name, Title) | | | | |
| | Timothy J. Fennell, CEO Area Code/Phone Number | IE well | | | Amendment (Must Pro | ovide Explanation in Part 3.) |
| | | E-mail | | | Date of Original Filing: | |
| | 858-755-1161 | | | | Date of Original Filling. | (month, day, year) |
| 2. | Function or Event Infor | mation | | | 40 | |
| | Does the agency have a tick | cet policy? Yes [| ⊠ No□ F | ace Value of | Each Ticket/Pass \$ 19 | |
| | Event Description: 2018 Sai | n Diego County Fair Provide Title/ Expla | nation | Pate(s)06 | <u>/ 01 / 18</u> - | 07 / 04 / 18 |
| | Ticket(s)/Pass(es) provided | by agency? Yes [| ⊠ No 🗆 If | no: | Name of Source | |
| | Miles Cales Callatalla all an annual a | | | yes: <u>Valdez,</u> | Name of Source Richard | |
| | Was ticket distribution made of agency official? | at the penest Yes [| ĭ No □ " | yes | Official's Name (Last, First) | |
| | or agency officials | | | | | |
| 3. | Recipients | | | | The second secon | |
| | • Use Section A to identify the agen | cy's department or unit. | Use Section B to i | dentify an individ | lual. • Use Section C to identif | ly an outside organization. |
| | A. Name of Agency, Depa | artment or Unit | Number of Ticket(s)/ Passes | Describe th | ne public purpose made purs | uant to the agency's policy |
| | | | | | · · · · · · · · · · · · · · · · · · · | |
| | | | | | | |
| | | | | | | |
| | B. Name of Indi (Last, Fir | | Number of Ticket(s)/ Passes | | Identify one of the fo | llowing: |
| | Valdez, Richard | | 12 | 5.3a)Perforr | nonial Role | role as Board VP |
| | | | | 5.3b) the off | nonial Role Other O king "Ceremonial Role" or "Other" desc icial and/or job duties o attendance at the event. | f the District Official |
| | C. Name of Outside O (include address and | | Number of Ticket(s)/ Passes | Describe th | ne public purpose made purs | uant to the agency's policy |
| | | | | | | |
| | | - | | | | |
| _ | \ I = 10° - (1° | | | | | |
| ł. | Verification | DO Daniel Harris 100 f | 1 1 1 100 10 | I la mara esta della di | About the additional to the | ndla albania de la companio |
| | I have read and understand FF with the requirements. | 'r∪ Regulations 18944 • | 4.1 ana 18942. | ı nave verified | tnat the distribution set fo | τη apove, is in accordance |
| | Themal | Timoth | ny J. Fennell | (| CEO/General Manager | 09/26/18 |
| | Signature of Agency Head of Design | | Print Name | Mary and the state of the state | Title | (month, day, year) |
| | POIMITION. | | | | | |

| Agency Name | | | butions | A Date Stamp | California OOO |
|---|-----------------|-----------------------------------|--|--|--|
| 22nd District Agricultural Association | | | | | Form OUZ |
| Division, Department, or Region (if applica | nble) | *** | | | For Official Use Only |
| CDFA | | | | | |
| Designated Agency Contact (Name, Title) | | , | | | |
| Timothy J. Fennell | | | | Amendment (Must F | Provide Explanation in Part 3.) |
| Area Code/Phone Number E-mail | | | | Date of Original Filing: | |
| 858-755-1161 | | | | | (month, day, year) |
| Function or Event Information | | | | | 5 |
| Does the agency have a ticket policy? | | - | | | 5 |
| Event Description: Sugarland Concert | @ SDCF | | Date(s) <u>06</u> | 02 / 18 | |
| Provided by agency | le Title/Explan | | f no: | | |
| | _ | | | Name of Source | |
| Was ticket distribution made at the beh of agency official? | est Yes [| No 🗆 🏻 | yes: <u>Valdez,</u> | Official's Name (Last, First) | |
| Recipients • Use Section A to identify the agency's departmen | nt or unit. | Use Section B to | Identify an individ | ual. • Use Section C to iden | tify an outside organization. |
| A. Name of Agency, Department or Uni | | Number of Ticket(s)/ Passes | 1 | | rsuant to the agency's policy |
| | | | | *** *** ****************************** | |
| B. Name of Individual (Last, First) | | Number of Ticket(s)/ Passes | | Identify one of the | following: |
| Valdez, Richard | | | | onial Role Other ding "Ceremonial Role" or "Other" de | |
| valadz, radiara | | 2 | 5.3b) the off | icial and/or job duties er attendance at the | of the District Official event. |
| valadz, radiara | | 2 | 5.3b) the off require his/h | | event. Income [|
| C. Name of Outside Organization (include address and description) | | Number of Ticket(s)/ | 5.3b) the off require his/h Ceren If chec | er attendance at the nonial Role Other Ching "Ceremonial Role" or "Other" do | event. Income [|
| Name of Outside Organization | | Number of Ticket(s)/ | 5.3b) the off require his/h Ceren If chec | er attendance at the nonial Role Other Ching "Ceremonial Role" or "Other" do | event. Income |
| Name of Outside Organization | ions 18944. | Number of Ticket(s)/ Passes | 5.3b) the off require his/h Ceren If check | er attendance at the nonial Role Other of the ding "Ceremonial Role" or "Other" did no nonial Role or "Other" did no | event. Income escribe below: rsuant to the agency's policy |
| C. Name of Outside Organization (include address and description) Verification I have read and upderstand FPPC Regulat | | Number of Ticket(s)/ Passes | 5.3b) the off require his/h Ceren If check Describe the | er attendance at the nonial Role Other of the ding "Ceremonial Role" or "Other" did no nonial Role or "Other" did no | event. Income [escribe below: resuant to the agency's policy forth above, is in accordance |

| 1. | Agency Name | | | | Date Stamp | California 802 |
|----|--|-----------------------|--|--------------------|--|-------------------------------|
| | 22nd District Agricultural Assoc | | | | | |
| | Division, Department, or Region | (if applicable) | · · · · · · · · · · · · · · · · · · · | | | For Official Use Only |
| | CDFA | | | | | |
| | Designated Agency Contact (Nam | ne, Title) | | | | |
| | Timothy J. Fennell | | | Amendment (Must I | Provide Explanation in Part 3.) | |
| | Area Code/Phone Number E-r | nail | | | , | , |
| | 858-755-1161 | | | | Date of Original Filing: | (month, day, year) |
| 2. | Function or Event Information | tion | | | | 0 |
| | Does the agency have a ticket | policy? Yes [| Each Ticket/Pass \$ $\frac{4}{}$ | U | | |
| | Event Description: Little Big To | wn @ SDCF | | oate(s) <u>06</u> | <u>, 15 , 18</u> | |
| | Tinket/a)/Dana(an) provided by | Provide Title/ Explai | | ino | | |
| | Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐ If no: | | | | Name of Source | |
| | Was ticket distribution made at | the behest Yes I | Richard Official's Name (Last, First) | | | |
| | of agency official? | | | | Official's Name (Last, First) | |
| 3. | Recipients • Use Section A to identify the agency's | department or unit. • | Use Section B to i | dentify an individ | lual. • Use Section C to iden | tify an outside organization. |
| | A. Name of Agency, Departme | ent or Unit | Number of Ticket(s)/ Passes | Describe th | e public purpose made pu | rsuant to the agency's policy |
| | · | | | | | |
| | B. Name of Individu (Last, First) | al | Number of Ticket(s)/ Passes | | Identify one of the | following: |
| | Valdez, Richard | | | | nonial Role 🔲 Other 🏻 | |
| | | | 4 | 5.3b) the off | king "Ceremonial Role" or "Other" d ficial and/or job duties ner attendance at the | of the District Official |
| | | | | | nonial Role | |
| | C. Name of Outside Organ (include address and des | | Number of Ticket(s)/ Passes | Describe th | ne public purpose made pu | rsuant to the agency's policy |
| | | | | | | |
| | <u> </u> | | | | | |

Timothy J. Fennell
Print Name

Comment:

09/26/18 (month, day, year)

CEO/General Manager

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

| ١. | Agency Name | | | Date Stamp | California OOO |
|----|---|-------------------------------|---|---|--|
| | 22nd District Agricultural Association | | | | Form OUZ |
| | Division, Department, or Region (if applicable) | | | · · | For Official Use Only |
| | CDFA | | | | · |
| | Designated Agency Contact (Name, Title) | | | | |
| | Timothy J. Fennell | | | Amendment (Must F | Provide Explanation in Part 3.) |
| | Area Code/Phone Number E-mail | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | , |
| | 858-755-1161 | | | Date of Original Filing: | (month, day, year) |
| 2. | Function or Event Information | | | | |
| | Does the agency have a ticket policy? | s⊠ No□ F | ace Value of | Each Ticket/Pass \$ $\frac{2}{}$ | 0 |
| | Event Description: The Fray @ SDCF | | | <u>, 27 , 18</u> | 1 1 |
| | Provide Title/Exp | olanation | | | Management of Management of American Am |
| | Ticket(s)/Pass(es) provided by agency? Ye | s⊠ No□ If | no: | Name of Source | |
| | Was ticket distribution made at the behest Ye | an×i Na⊏ If | ves: Valdez, | Richard Official's Name (Last, First) | |
| | of agency official? | 2 ☑ NO□ | | Official's Name (Last, First) | |
| | | annatur i Sairinte de Materia | | | |
| 3. | Recipients | | | | |
| | • Use Section A to identify the agency's department or unit. | | dentify an indivic | lual. • Use Section C to iden | itify an outside organization. |
| | A, Name of Agency, Department or Unit | Number of Ticket(s)/ | Describe th | ne public purpose made pu | rsuant to the agency's policy |
| | | Passes | | | |
| | | | | | |
| | | | <u> </u> | | |
| | | | | | |
| | Name of heaterstand | Number | | | |
| | B. Name of Individual (Last, First) | of Ticket(s)/ Passes | | Identify one of the | following: |
| | Valdez, Richard | | Ceren | nonial Role Other | |
| | valdoz, Monard | 4 | f chec 5.3b) the off | king "Ceremonial Role" or "Other" d ficial and/or job duties | escribe below: of the District Official |
| | | | | ner attendance at the | |
| | | | I | nonial Role 🔲 Other 🛭 | |
| | | | If chec | king "Ceremonial Role" or "Other" d | escribe below: |
| | • · · · · · · · · · · · · · · · · · · · | | | | - M M M M M M M M. |
| | C. Name of Outside Organization (include address and description) | Number of Ticket(s)/ | Describe th | ne public purpose made pu | rsuant to the agency's policy |
| | American durings and description, | Passes | | | |
| | | | | | |
| | , | | | | |
| | | | | | |
| 1 | Verification / | | | | |
| т. | I have read and understand FPPC Regulations 189 | 44.1 and 18942. | I have verified | that the distribution set | forth above, is in accordance |
| | with the requirements. | | , | | in the distriction of the distri |
| | Time | othy J. Fennell | (| CEO/General Manage | er 09/26/18 |
| | Signature V Agency Head or Designee | Print Name | | Title | (month, day, year) |
| , | Commont | ٠ | | | |
| | Comme/nt: | | | | Managagara (1444) (1444) (1444) (1444) (1444) (1444) (1444) (1444) (1444) (1444) (1444) (1444) (1444) (1444) |

| Agency Name | | | | Date Stamp | California OOO |
|---|---|--|---|--|--|
| 22nd District Agricultural Association | n | | | | Form 802 |
| Division, Department, or Region (if ap) | plicable) | ······································ | | | For Official Use Only |
| CDFA | | | | | |
| Designated Agency Contact (Name, Title | e) | , | | | |
| Timothy J. Fennell, CEO | | | | Amendment (Mu. | ust Provide Explanation in Part 3,) |
| Area Code/Phone Number E-mail | , | | | , ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | or revide any any |
| 858-755-1161 | | | | Date of Original Filin | ng: (month, day, year) |
| Function or Event Information | | | | | |
| Does the agency have a ticket polic | y? Yes ∑ | ⊠ No 🗆 📑 | ace Value of | Each Ticket/Pass \$ | 19 |
| Event Description: 2018 San Diego | County Fair | г | nate(s) 06 | <u>, 01 , 18</u> | 07 , 04 , 18 |
| Part Description. | rovide Title/Explan | nation | vaic(3) | // | |
| Ticket(s)/Pass(es) provided by ager | ncy? Yes 🛭 | No □ I | f no: | | |
| \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | anhant ve m | | fyes: Shewm | Name of Source aker, Steve | |
| Was ticket distribution made at the lost of agency official? | penest Yes 2 | ŭ No∐ " | yes | Official's Name (Last, Fli | rst) |
| Recipients • Use Section A to identify the agency's depar | tment or unit. • | Use Section B to | identify an indivic | lual. • Use Section C to ic | dentify an outside organization. |
| A. Name of Agency, Department or | Unit | Number of Ticket(s)/ Passes | Describe th | e public purpose made | pursuant to the agency's policy |
| | | | | | |
| D Name of Individual | | Number | | | |
| B. Name of Individual (Last, First) | | Number of Ticket(s)/ Passes | | ldentify one of ti | |
| و حيوا | | of Ticket(s)/ | If chec | nonial Role Othe | or I Income [|
| (Last, First) | | of Ticket(s)/ Passes | 5.3a)Perform | nonial Role Othe king "Ceremonial Role" or "Other mance of a ceremon | r Income [|
| (Last, First) | | of Ticket(s)/ Passes | 5.3a)Perform representing Cerer if chec 5.3b) the off | nonial Role Othe king "Ceremonial Role" or "Othe, mance of a ceremor y the Board of Direct nonial Role Othe king "Ceremonial Role" or "Othe, | income I in lincome I in describe below: es of the District Official |
| (Last, First) | | of Ticket(s)/ Passes | 5.3a)Perforr representing Cerer # chec 5.3b) the off require his a | nonial Role Othe king "Ceremonial Role" or "Othe mance of a ceremor y the Board of Direct nonial Role Othe king "Ceremonial Role" or "Othe icial and/or job dutie ttendance at the ev | income in lincome in describe below: es of the District Official |
| Shewmaker, Steve Name of Outside Organization | | of Ticket(s)/ Passes 22 Number of Ticket(s)/ | 5.3a)Perforr representing Cerer # chec 5.3b) the off require his a | nonial Role Othe king "Ceremonial Role" or "Othe mance of a ceremor y the Board of Direct nonial Role Othe king "Ceremonial Role" or "Othe icial and/or job dutie ttendance at the ev | income in lincome in describe below: es of the District Official in lincome in lincom |
| Shewmaker, Steve C. Name of Outside Organization (include address and description) | | of Ticket(s)/ Passes 22 Number of Ticket(s)/ | 5.3a)Perforr representing Cerer # chec 5.3b) the off require his a | nonial Role Othe king "Ceremonial Role" or "Othe mance of a ceremor y the Board of Direct nonial Role Othe king "Ceremonial Role" or "Othe icial and/or job dutie ttendance at the ev | income inc |
| Shewmaker, Steve Name of Outside Organization | on) | of Ticket(s)/ Passes 22 Number of Ticket(s)/ Passes | 5.3a)Perforr representing Cere If chec 5.3b) the off require his a Describe th | nonial Role Othe king "Ceremonial Role" or "Other mance of a ceremor g the Board of Direct monial Role Othe king "Ceremonial Role" or "Other icial and/or job dutie ttendance at the ev me public purposé made | Income Income Income Intradescribe below: Inial role as Board Presider of the 22nd DAA Income Inco |

| | | | butions | A | Public Document |
|----------|--|---|--|--|--|
| | Agency Name | | | Date Stamp | California 802 |
| | 22nd District Agricultural Association | | | | 1 01111 |
| | Division, Department, or Region (if applicable) | | | | For Official Use Only |
| | CDFA | | |] | |
| | Designated Agency Contact (Name, Title) | | | | |
| | Timothy J. Fennell | | | Amendment (Must i | Provide Explanation in Part 3.) |
| 1 | Area Code/Phone Number E-mail | | | | |
| | 858-755-1161 | | | Date of Original Filing: | (month, day, year) |
| <u>.</u> | Function or Event Information | | | | |
| | Does the agency have a ticket policy? Yes [| ⊠ No□ F | ace Value of | Each Ticket/Pass \$ 7 | 75 |
| | | | | <u>, 02 , 18 </u> | , , |
| | Provide Title/ Explai | nation | rate(s) | | |
| | Ticket(s)/Pass(es) provided by agency? Yes [| No □ If | no; | Name of Source | |
| | | 11 | Shewm | Name of Source Jaker Steve | |
| , | Was ticket distribution made at the behest Yes | No 🔲 🛚 🖺 | yes: <u>Grown</u> | aker, Steve Official's Name (Last, First) | |
| | of agency official? | | | | |
| | • Use Section A to identify the agency's department or unit. • A. Name of Agency, Department or Unit | Number of Ticket(s)/ Passes | | | ntify an outside organization. |
| | | I . | | | |
| | | | | | |
| | B. Name of Individual (Last, First) | Number of Ticket(s)/ Passes | | Identify one of the | following: |
| | Real B | of Ticket(s)/ | 5.3b) the of | monial Role Other C | Income [lescribe below: |
| | (Last, First) | of Ticket(s)/ Passes | 5.3b) the of require his/ | monial Role Other Oth | ☑ Income ☐ lescribe below: s of the District Official event. ☐ Income ☐ |
| | (Last, First) | of Ticket(s)/ Passes | f chec | monial Role Other Other Other Color or "Other" of the desiration of the desirat | ☑ Income ☐ lescribe below: s of the District Official event. ☐ Income ☐ |
| | (Last, First) Shewmaker, Steve Name of Outside Organization | of Ticket(s)/ Passes 6 Number of Ticket(s)/ | f chec | monial Role Other Other Other Color or "Other" of the desiration of the desirat | Income Control of the District Official event. Income Control of the District Official event. Income Control of the District Official event. |
| | (Last, First) Shewmaker, Steve Name of Outside Organization | of Ticket(s)/ Passes 6 Number of Ticket(s)/ | f chec | monial Role Other Other Other Color or "Other" of the desiration of the desirat | Income [lescribe below: s of the District Official event. Income [lescribe below: |
| | (Last, First) Shewmaker, Steve Name of Outside Organization | of Ticket(s)/ Passes 6 Number of Ticket(s)/ | f chec | monial Role Other Other Other Color or "Other" of the desiration of the desirat | Income [lescribe below: s of the District Official event. Income [lescribe below: |
| | Shewmaker, Steve C. Name of Outside Organization (include address and description) | of Ticket(s)/ Passes 6 Number of Ticket(s)/ Passes | f chec 5.3b) the of require his/l Cere if chec | monial Role Other Other of "Other" of ficial and/or job duties ner attendance at the monial Role Other | Income [lescribe below: s of the District Official event. Income [lescribe below: |
| | (Last, First) Shewmaker, Steve C. Name of Outside Organization (include address and description) Verification I have read and understand FPPC Regulations 18944 with the requirements. | of Ticket(s)/ Passes 6 Number of Ticket(s)/ Passes | S.3b) the of require his/l Cere If check Describe to | monial Role Other Other of "Other" of ficial and/or job duties ner attendance at the monial Role Other | Income Clescribe below: s of the District Official event. Income Clescribe below: Insuant to the agency's policy forth above, is in accordance. |

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions **A Public Document** 1. Agency Name California OOO Date Stamp

| - | 22nd District Agricultural As | sociation | · | Form 8UZ | | |
|----|--|--|-------------------------|---------------------------------------|--|--|
| | Division, Department, or Regi | ion (if applicable) | | | | For Official Use Only |
| | CDFA | | | | · | |
| | Designated Agency Contact (| Name, Title) | | | | |
| | Timothy J. Fennell | | | | Amendment (Must Pro | vide Explanation In Part 3.) |
| | Area Code/Phone Number | E-mail | | | | |
| | 858-755-1161 | | | | Date of Original Filing: | (month, day, year) |
| 2. | Function or Event Infor | mation | | | | |
| | Does the agency have a tick | ket policy? Yes [| ⊠ No□ F | ace Value of | Each Ticket/Pass \$ 40 | |
| | Event Description: Little Big | Town @ SDCF | | oate(s)06 | <u>, 15 , 18</u> | |
| | | Provide Title/Explai | nation | | | |
| | Ticket(s)/Pass(es) provided | by agency? Yes [| ⊠ No 🗆 If | no: | Name of Source | |
| | Was ticket distribution made | e at the behest Yes | | yes: Shewm | aker, Steve | |
| | of agency official? | , 66 | | | Official's Name (Last, First) | |
| 3. | Recipients | | | | | |
| | • Use Section A to identify the agen | cy's department or unit. • | Use Section B to i | dentify an individ | lual. • Use Section C to identif | y an outside organization. |
| | Δ Name of Agency, Depa | retmont or Unit | Number | Deparibe th | na nublia numana mada numa | und to the annual calley |
| | A. Name of Agency, Depa | ardilent of Onit | of Ticket(s)/ Passes | Describe ti | ne public purpose made purs | ant to the agency's policy |
| | | | | | | |
| | | general de la company de l | | | | |
| | | | | | | |
| | | | Number | | | <u>*************************************</u> |
| | B. Name of Indi (Last, Fir | | of Ticket(s)/ Passes | | Identify one of the fo | llowing: |
| | Shewmaker, Steve | | | | monial Role Other X | Income |
| | | | 4 | 5.3b) the off | ficial and/or job duties o | f the District Official |
| | 6-15-16-16-16-1-1-1-1-1-1-1-1-1-1-1-1-1- | | | | ner attendance at the ev | |
| | | | | | monial Role Other Other Other Other Other Other Other Other Other | Income Income |
| | | | | | | |
| | Name of Outside O | rganization | Number | | | |
| | C. (include address and | | of Ticket(s)/ Passes | Describe tr | ne public purpose made purs | lant to the agency's policy |
| | | | | | | |
| | | | | <u></u> | | *************************************** |
| | | | | | | |
| | | | | | | |
| 1. | Verification | | | | | |
| | I have read and understand FF with the requirements. | PPC Regulations 18944 | .1 and 18942. | I have verified | that the distribution set for | th above, is in accordance |
| | 1/101.11 | Time after | u I Espesii | , | CEO/Conord Manager | 00/00/40 |
| | Signature of Agency Head or Design | | ny J. Fennell | · · · · · · · · · · · · · · · · · · · | CEO/General Manager | 09/26/18 (month, day, year) |
| / | / / | · | | | | (|
| 1 | Comment: | | | | | |

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

| 1. Agency Name | | | Date Stamp | California 802 |
|--|---------------------------------------|--|--|--|
| 22nd District Agricultural Association | | | | . 01111 |
| Division, Department, or Region (if applicable) | | | | For Official Use Only |
| CDFA | | | | |
| Designated Agency Contact (Name, Title) | | | | |
| Timothy J. Fennell | | | Amendment (Must P | Provide Explanation in Part 3.) |
| Area Code/Phone Number E-mail | | | | |
| 858-755-1161 | | | Date of Original Filing: | (month, day, year) |
| 2. Function or Event Information | | \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ | | |
| Does the agency have a ticket policy? | s⊠ No□ F | ace Value of | Each Ticket/Pass \$ 40 |) |
| Event Description: Larry the Cable Guy @ SD | | | <u>, 16 , 18</u> | |
| Provide Title/Exp | olanation | pate(s) | | |
| Ticket(s)/Pass(es) provided by agency? Ye | s⊠ No□ If | f no: | etino | |
| | | . Shewm | Name of Source | |
| Was ticket distribution made at the behest Ye | s⊠ No□ ^{II} | yes: Onewin | aker, Steve Official's Name (Last, First) | The state of the s |
| of agency official? | | | , , , | |
| 3. Recipients | | | | |
| Use Section A to identify the agency's department or unit. | • Use Section B to i | identify an individ | lual. • Use Section C to ident | tify an outside organization. |
| A. Name of Agency, Department or Unit | Number of Ticket(s)/ | | | suant to the agency's policy |
| | Passes | | | |
| | | | | |
| | | | | |
| | | | | |
| | Number | ļ | | |
| B. Name of Individual (Last, First) | of Ticket(s)/ Passes | | Identify one of the f | ollowing: |
| Shewmaker, Steve | | | nonial Role Other Other | |
| | 6 | If checking "Ceremonial Role" or "Other" describe below: 5.3b) the official and/or job duties of the District Official | | |
| | | | ner attendance at the e | |
| | | 1 | monial Role Other C | |
| | | " chọc | ining coroniomaritors or other de | suiba below. |
| | N | | | |
| C. Name of Outside Organization (include address and description) | Number of Ticket(s)/ | Describe th | ne public purpose made pur | suant to the agency's policy |
| | Passes | | | |
| | | | | |
| | | | | ATT W1 1111 |
| | | 1 | | |
| A | | | | |
| 4. Verification | 44.4 | at the second | | |
| I have read and understand FPPC Regulations 189 with the requirements. | 44.1 and 18942. | ı nave verified | tnat the distribution set f | orth above, is in accordance |
| 116, 011 | AL I P | | 050/0 | |
| Signature of Agency Head or Designee | othy J. Fennell Print Name | | CEO/General Manage | r 09/26/18 (month, day, year) |
| James of Golley Flora of Bookship | · · · · · · · · · · · · · · · · · · · | | Higo | (monus, vay, year) |
| Comment: | | | | |

| Event Inform cy have a ticke ion: 2018 San (es) provided b ribution made a | et policy? Provide Title/E at the behest y y's department or un | Explanation Yes⊠ No⊡ Yes⊠ No⊡ | Date(s) If no: If yes: Schenk to identify an indivi | Feach Ticket/Pass \$ 19 / 01 / 18 07 | outside organization. |
|--|---|---|--|---|--|
| ency Contact (Nonell, CEO) ne Number Event Inform cy have a ticket ion: 2018 San des) provided be ribution made a cial? | E-mail nation et policy? Y Provide Title/E by agency? Y at the behest Y | Fair Explanation Yes No No No No No No Number of Ticket(s | Date(s) If no: If yes: Schenk to identify an indivi | Date of Original Filing: | Explanation in Part 3.) nonth, day, year) |
| Event Inform cy have a ticketion: 2018 San (es) provided be ribution made a cial? | E-mail nation et policy? Y Diego County F Provide Title/F by agency? Y at the behest Y y's department or un | Fair Explanation Yes No No No No No No Number of Ticket(s | Date(s) If no: If yes: Schenk to identify an indivi | Date of Original Filing: | outside organization. |
| Event Inform cy have a ticketion: 2018 San (es) provided be ribution made a cial? | E-mail nation et policy? Y Diego County F Provide Title/F by agency? Y at the behest Y y's department or un | Fair Explanation Yes No No No No No No Number of Ticket(s | Date(s) If no: If yes: Schenk to identify an indivi | Date of Original Filing: | outside organization. |
| Event Inform cy have a ticke ion: 2018 San (es) provided b ribution made a cial? | nation et policy? Y Diego County F Provide Title/ E by agency? Y at the behest Y y's department or un | Fair Explanation Yes No No No No No No Number of Ticket(s | Date(s) If no: If yes: Schenk to identify an indivi | Date of Original Filing: | onth, day, year) |
| Event Inform cy have a ticke ion: 2018 San (es) provided b ribution made a cial? | nation et policy? Y Diego County F Provide Title/ E by agency? Y at the behest Y y's department or un | Fair Explanation Yes No No No No No No Number of Ticket(s | Date(s) If no: If yes: Schenk to identify an indivi | FEach Ticket/Pass \$ 19 / 01 / 18 07 Name of Source k, Frederick Official's Name (Last, First) | outside organization, |
| cy have a ticker ion: 2018 San (es) provided by ribution made a cial? | et policy? Y Diego County F Provide Title/E by agency? Y at the behest Y y's department or un | Fair Explanation Yes No No No No No No Number of Ticket(s | Date(s) If no: If yes: Schenk to identify an indivi | FEach Ticket/Pass \$ 19 / 01 / 18 07 Name of Source k, Frederick Official's Name (Last, First) | outside organization, |
| cy have a ticker ion: 2018 San (es) provided by ribution made a cial? | et policy? Y Diego County F Provide Title/E by agency? Y at the behest Y y's department or un | Fair Explanation Yes No No No No No No Number of Ticket(s | Date(s) If no: If yes: Schenk to identify an indivi | Name of Source k, Frederick Official's Name (Last, First) | outside organization, |
| ion: 2018 San (es) provided b ribution made a cial? | Diego County F Provide Title/E by agency? Y at the behest Y y's department or un | Fair Explanation Yes No No No No No No Number of Ticket(s | Date(s) If no: If yes: Schenk to identify an indivi | Name of Source k, Frederick Official's Name (Last, First) | outside organization, |
| (es) provided be ribution made a cial? | Provide Title/E by agency? At the behest Y y's department or un | Yes No | If no: If yes: Schenk to identify an indivi | Name of Source k, Frederick Official's Name (Last, First) Idual. • Use Section C to identify an | outside organization, |
| (es) provided be ribution made a cial? | Provide Title/E by agency? At the behest Y y's department or un | Yes No | If yes: Schenk | k, Frederick Official's Name (Last, First) Idual. • Use Section C to identify an | |
| ribution made a | at the behest Y | Yes No No No No Number of Ticket(s | If yes: Schenk | k, Frederick Official's Name (Last, First) Idual. • Use Section C to identify an | |
| cial? | y's department or un | nit. • Use Section B Number of Ticket(s | to identify an indivi | Official's Name (Last, First) Idual. • Use Section C to identify an | |
| cial? | y's department or un | nit. • Use Section B Number of Ticket(s | | idual. • Use Section C to identify an | |
| | | Number of Ticket(s | | | |
| | | Number of Ticket(s | | | |
| of Agency, Depart | tment or Unit | of Ticket(s |)/ Describe t | he public purpose made pursuant | to the agency's policy |
| | | Fasses | | | |
| | | | | | |
| Name of Indivi (Last, First, | | Number of Ticket(s Passes | y | Identify one of the follow | ing: |
| erick | | 35 | 5.3a)Perfor | emonial Role Other Decking "Ceremonial Role" or "Other" describe be "mance of a ceremonial role ag the Board of Directors for | as Board Member |
| | | | 5.3b) the of | omonial Role Other Other ockling "Ceremonial Role" or "Other" describe be ficial and/or job duties of the attendance at the event. | |
| me of Outside Org ude address and c | | Number of Ticket(s Passes | | the public purpose made pursuant | to the agency's policy |
| | | | | | |
| | | | | | |
| ynderstand FPF nents. | °C Regulations 18 | 8944.1 and 1894 | ¹ 2. I have verified | I that the distribution set forth a | above, is in accordanc |
| - // . | | mothy J. Fenne |) | CEO/General Manager | 09/26/18 |
| | | ments. Mill Ti | ments. Timothy J. Fenne | ments. Timothy J. Fennell | |

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

| 1. | Agency Name | | | | Date Stamp | California 802 | | | |
|----|--|---------------------|---|--|---|--|--|--|--|
| | 22nd District Agricultural Ass | | | | | | | | |
| | Division, Department, or Regi | on (if applicable) | | For Official Use Only | | | | | |
| | CDFA | | | | | | | | |
| | Designated Agency Contact (| Name, Title) | | | | | | | |
| | Timothy J. Fennell | | | | Amendment (Must | Provide Explanation in Part 3.) | | | |
| | Area Code/Phone Number | E-mail | | | , | , | | | |
| | 858-755-1161 | | | | Date of Original Filing | (month, day, year) | | | |
| 2. | Function or Event Inform | nation | | | | | | | |
| | Does the agency have a tick | et policy? Yes | ⊠ No□ F | ace Value of | Each Ticket/Pass \$ 2 | 75 | | | |
| | Event Description: Sugarlan | | | | <u>, 02 , 18 </u> | , , | | | |
| | Event Description. | Provide Title/Expl | anation | vale(s) | J- | | | | |
| | Ticket(s)/Pass(es) provided | by agency? Yes | ⊠ No □ If | no: | Name of Source | | | | |
| | Man tintest distribution manda | | nen | . ves. Schenk | Name of Source I, Frederick | - | | | |
| | Was ticket distribution made of agency official? | at the penest Yes | ⊠ No□ " | усъ | C, Frederick Official's Name (Last, First | 0 | | | |
| | or agency officials | | | | | | | | |
| 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, Depa | rtment or Unit | Number of Ticket(s)/ Passes | Describe th | scribe the public purpose made pursuant to the agency's polic | | | | |
| | | | 1 | | | | | | |
| | | | | | | | | | |
| | | | *************************************** | | | | | | |
| | | | | | | | | | |
| | B. Name of Indi (Last, Fir | | Number of Ticket(s)/ Passes | | Identify one of the | e following: | | | |
| | Schenk, Frederick | | | | nonial Role 🔲 Other | | | | |
| | Conorm, 1 Todorion | | 6 | 5.3b) the of | oking "Ceremonial Role" or "Other" ficial and/or lob dutle | describe below: s of the District Official | | | |
| | | | | | ner attendance at the | | | | |
| | | | | | monial Role D Other | | | | |
| | | | | ir cned | cking "Ceremonial Role" or "Other" | describe below: | | | |
| | | | Number | | | | | | |
| | C. Name of Outside O (include address and | | of Ticket(s)/ Passes | Describe th | ne public purpose made p | ursuant to the agency's policy | | | |
| | plane and the second se | | 1 40505 | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | | | | | | |
| 4. | Verification | | | | | A Committee of the Comm | | | |
| | I have read and understand FF with the reguirements. | PC Regulations 1894 | 4.1 and 18942. | l have verified | that the distribution set | t forth above, is in accordance | | | |
| • | - Wand | Timot | thy J. Fennell | | CEO/General Manag | jer 09/26/18 | | | |
| | Signature of Agency Head or Design | | Print Name | Marrie Marrie V | Title | (month, day, year) | | | |
| , | / | | | | | | | | |
| ſ | Comment: | · | · · · · · · · · · · · · · · · · · · · | ······································ | | | | | |
| l. | / | | | | | | | | |

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions 1. Agency Name

| I. Agency Name | | | Date Stamp | California QA2 | |
|--|-----------------------------------|---|---|---------------------------------|--|
| 22nd District Agricultural Association | | | | Form OUZ | |
| Division, Department, or Region (if applicable) | | , , , , , , , , , , , , , , , , , , , |] | For Official Use Only | |
| CDFA | | | | | |
| Designated Agency Contact (Name, Title) | | | 1 | · | |
| Timothy J. Fennell | | | Amendment (Must | Provide Explanation in Part 3.) | |
| Area Code/Phone Number E-mail | | | | | |
| 858-755-1161 | | | Date of Orlginal Filing: | (month, day, year) | |
| 2. Function or Event Information | | | | | |
| Does the agency have a ticket policy? | Yes⊠ No□ F | ace Value of | Each Ticket/Pass \$ 4 | .0 | |
| Event Description: Little Big Town @ SDC | | | <u>, 15 , 18</u> | | |
| Provide Tit | le/Explanation | Date(s) | // | | |
| Ticket(s)/Pass(es) provided by agency? | Yes ☑ No ☐ | f no: | Name of Source | | |
| | | . Schenk | Name of Source Frederick | | |
| Was ticket distribution made at the behest | Yes ⊠ No 🗆 🏻 | yes: Odrionik | , Frederick Official's Name (Last, First) |) | |
| of agency official? | | | , | | |
| 3. Recipients | | | | | |
| Use Section A to identify the agency's department or | unit. • Use Section B to | identify an individ | hual. • Use Section C to ider | atify an outside organization. | |
| A, Name of Agency, Department or Unit | Number of Ticket(s)/ | T . | | ursuant to the agency's policy | |
| | Passes | | | | |
| | | | | | |
| | | | | | |
| | | 1 | | | |
| | | | | | |
| B. Name of Individual (Last, First) | Number of Ticket(s)/ Passes | | Identify one of the | following: | |
| Schenk, Frederick | | | nonial Role Other | | |
| | 4 | | If checking "Ceremonial Role" or "Other" describe below: e official and/or job duties of the District Official | | |
| | | | ner attendance at the | | |
| | | Ceren | nonial Role 🔲 Other [| income | |
| | | If checi | king "Ceremonial Role" or "Other" o | lescribe below: | |
| | | | | | |
| Name of Outside Organization | Number of Ticket(s)/ | Describe th | ne public purpose made pu | rsuant to the agency's policy | |
| (include address and description) | Passes | | | | |
| | | | | | |
| | | · · · · · · · · · · · · · · · · · · · | | | |
| | | | | | |
| | | | | | |
| l. 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 regulirements. | | | | | |
| WMMIII | Timothy J. Fennell | (| CEO/General Manage | er 09/26/18 | |
| Signature of Agency Head or Designee | Print Name | | Title | (month, day, year) | |
| | | | | | |
| Comment: | | | | | |

Agency Report of:

| | _ | _ | - | | | | | | |
|---------------|-------|--------|----|---------|-----------|------|--------------|-------------|---------------|
| $\overline{}$ | | | 1 | P - I - | | | T! - I 4/D - | I | Distributions |
| 1 : | Δran | ากทเร | 21 | KUID | -Vante | ากก | IICKATIMA | ee i | DIETRINITIONE |
| v | CICII | 101111 | 21 | IVOIG | E A CLIFF | ania | HONGUL A | 33 1 | PISHIDUHOHS |
| | | | | | | | | | |

| _ | A All | T GOO BIOTI | bactono | T | | | | | | |
|---------|--|-----------------------------------|--|--|--|--|--|--|--|--|
| 1. | Agency Name | Date Stamp | California 802 | | | | | | | |
| | 22nd District Agricultural Association | | For Official Use Only | | | | | | | |
| | Division, Department, or Region (if applicable) | | 1 or official doc offin | | | | | | | |
| | CDFA | | | | | | | | | |
| | Designated Agency Contact (Name, Title) | | | | | | | | | |
| | Timothy J. Fennell | | | Amendment (Must I | Provide Explanation in Part 3.) | | | | | |
| | Area Code/Phone Number E-mail | | | , | | | | | | |
| | 858-755-1161 | | | Date of Original Filing: | (month, day, year) | | | | | |
| 2. | Function or Event Information | | | | | | | | | |
| | | s⊠ No□ F | ace Value of | Each Ticket/Pass \$ 4 | 0 | | | | | |
| | | | | | The state of the s | | | | | |
| | Event Description: Larry the Cable Guy @ SD Provide Title/Ex | | Date(s) U6 | <u>/ 16 / 18</u> | | | | | | |
| | | | f no: | | | | | | | |
| | ricket(s)/r-ass(es) provided by agency! | | | Name of Source | | | | | | |
| | Was ticket distribution made at the behest Ye | s⊠ No⊟ H | fyes: Schenk | , Frederick | | | | | | |
| | of agency official? | | | Official's Name (Last, First) | | | | | | |
| _ | en e | | | | | | | | | |
| 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 | | | | | | | |
| | | | · · · · · · · · · · · · · · · · · · · | | <u> </u> | | | | | |
| | | | : | | | | | | | |
| | | | | | Annual Control of the | | | | | |
| | | | | | | | | | | |
| | | Number | | | | | | | | |
| | B. Name of Individual (Last, First) | of Ticket(s)/ Passes | | Identify one of the | following: | | | | | |
| | <u>,</u> | 1 20000 | Cerer | monial Role Other [| X Income □ | | | | | |
| | Schenk, Frederick | 2 | If chec | king "Ceremonial Role" or "Other" d | escribe below: | | | | | |
| | | | | | of the District Official | | | | | |
| | | | 1 | ner attendance at the | *** -1 - -2 - -1 | | | | | |
| | | | | monial Role Other C cking "Ceremonial Role" or "Other" o | | | | | | |
| | | | | | | | | | | |
| | Name to the constitution | Number | 1 2 2 | | | | | | | |
| | C. Name of Outside Organization (include address and description) | of Ticket(s)/ Passes | Describe th | ne public purpose made pu | rsuant to the agency's policy | | | | | |
| | | 1 03003 | | | | | | | | |
| | | ľ | | | | | | | | |
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| | | | | | | | | | | |
| _ | \/_vi[c] = -4: - v | | | and the second of the second o | | | | | | |
| 4. | Verification | 1444 | l la accession and discussion and | Aland Alan alladulla vidin in and | fauth about to to accordance | | | | | |
| | I have read and understand FPPC Regulations 189 with the requirements. | 144.1 and 18942. | i nave verified | tnat the distribution set | τοττη apove, is in accordance | | | | | |
| كالمذور | | | | | | | | | | |
| | Signatur of Agency Head or Designee | othy J. Fennell Print Name | | CEO/General Manage | | | | | | |
| | Signature of Againsy Fleats of Designate | i nik iyanle | | ılıa | (month, day, year) | | | | | |
| | Comment: | | | | | | | | | |
| I | / / | | | | | | | | | |
| ı | | | | | | | | | | |

| Agency Name | A Public Date Stamp Californ | | ornia 802 | | | |
|--|--|---|--|--|---|--|
| 22nd District Agricultural Association | า | | | | Fo | |
| Division, Department, or Region (if app | olicable) | | | | For | Official Use Only |
| CDFA | | | | | | |
| Designated Agency Contact (Name, Titl | e) | | | | | |
| Timothy J. Fennell | | | | Amendment (| Must Provide Expla | nation in Part 3.) |
| Area Code/Phone Number E-mail | | | | | | ·····, |
| 858-755-1161 | | | | Date of Original F | iling:(month, | day, year) |
| Function or Event Information | | | | | | |
| Does the agency have a ticket polic | y? Yes[| ⊠ No□ F | ace Value of | Each Ticket/Pass | s \$ 20 | |
| Event Description: The Fray @ SDO |)F | | Date(s)06 | , 27 , 18 | / | / |
| Pi | rovide Title/Expla | nation | f no: | | | |
| Ticket(s)/Pass(es) provided by ager | icy ? Yes [| | | Name of Source | | |
| Was ticket distribution made at the b | ehest Yes | XI No II | yes: Schenk | , Frederick | | |
| of agency official? | | | | Official's Name (Last | , First) | |
| Recipients | anner de la companya | | | | | |
| • Use Section A to identify the agency's depar | tment or unit. • | Use Section B to i | identify an individ | lual. • Use Section C t | o identify an outsi | de organization. |
| A. Name of Agency, Department or | Unit | Number | Dosaribo th | o nublio nurnoso ma | do nurcuant to th | o aganavia naliav |
| A. Name of Agency, Department of | Onit | of Ticket(s)/ Passes | Describe tr | e public purpose ma | de pursuant to th | e agency's policy |
| | | | | | | |
| | | | | | | |
| | | | | | | and the second s |
| The decrease and an income also account and allowers the same and a second or decrease and a sec | | | - · · · · · · · · · · · · · · · · · · · | | | |
| R Name of Individual | | Number of TicketteV | | Identify one o | of the following: | |
| B. Name of Individual (Last, First) | | Number of Ticket(s)/ Passes | | | of the following: | |
| | | of Ticket(s)/ | I . | nonial Role 🔲 💢 O | ther 🗵 | Income |
| (Last, First) | | of Ticket(s)/ | If chec | | other 🔀 | |
| (Last, First) | | of Ticket(s)/ Passes | 5.3b) the off require his/h | nonial Role CO king "Ceremonial Role" or "C icial and/or job di ner attendance at | other 🗵 Other describe below: utiles of the Ditthe event. | strict Official |
| (Last, First) | | of Ticket(s)/ Passes | 5.3b) the off require his/h | nonial Role | other Other describe below: utiles of the Distribe event. | |
| (Last, First) | | of Ticket(s)/ Passes | 5.3b) the off require his/h | nonial Role CO king "Ceremonial Role" or "C icial and/or job di ner attendance at | other Other describe below: utiles of the Distribe event. | strict Official |
| Schenk, Frederick | n | of Ticket(s)/ Passes 2 | 5.3b) the off require his/r Ceren | nonial Role | other Other describe below: uties of the Distance the event. Other Distance Other describe below: | strict Official |
| (Last, First) | | of Ticket(s)/ Passes | 5.3b) the off require his/r Ceren | nonial Role | other Other describe below: uties of the Distance the event. Other Distance Other describe below: | strict Official |
| (Last, First) Schenk, Frederick Name of Outside Organization | | of Ticket(s)/ Passes 2 Number of Ticket(s)/ | 5.3b) the off require his/r Ceren | nonial Role | other Other describe below: uties of the Distance the event. Other Distance Other describe below: | strict Official |
| (Last, First) Schenk, Frederick Name of Outside Organization | | of Ticket(s)/ Passes 2 Number of Ticket(s)/ | 5.3b) the off require his/r Ceren | nonial Role | other Other describe below: uties of the Distance the event. Other Distance Other describe below: | strict Official |
| (Last, First) Schenk, Frederick Name of Outside Organization | | of Ticket(s)/ Passes 2 Number of Ticket(s)/ | 5.3b) the off require his/r Ceren | nonial Role | other Other describe below: uties of the Distance the event. Other Distance Other describe below: | strict Official |
| Schenk, Frederick C. Name of Outside Organization (include address and description) | | of Ticket(s)/ Passes 2 Number of Ticket(s)/ | 5.3b) the off require his/r Ceren | nonial Role | other Other describe below: uties of the Distance the event. Other Distance Other describe below: | strict Official |
| Schenk, Frederick C. Name of Outside Organization (include address and description) | on) | of Ticket(s)/ Passes 2 Number of Ticket(s)/ Passes | 5.3b) the off require his/h Ceren if chec | nonial Role | other oescribe below: utiles of the Dirthe event. other oescribe below: other oescribe below: de pursuant to th | strict Official Income e agency's policy |
| Schenk, Frederick C. Name of Outside Organization (include address and description) | on) | of Ticket(s)/ Passes 2 Number of Ticket(s)/ Passes | 5.3b) the off require his/h Ceren if chec | nonial Role | other oescribe below: utiles of the Dirthe event. other oescribe below: other oescribe below: de pursuant to th | strict Official Income e agency's policy |
| C. Name of Outside Organization (include address and description) Verification I have read and understand FPPC Regional Science (Include address and FPPC Regional Include address and Include address and Include address and Include address and Include I | on) ulations 18944 | of Ticket(s)/ Passes 2 Number of Ticket(s)/ Passes | 5.3b) the off require his/h | nonial Role | other Other describe below: uties of the Distribe event. Other Other describe below: de pursuant to the | strict Official Income e agency's policy |

Agency Report of:

| Ceremonial Role Events and Ticket/Pass Distribution | 15 |
|---|----|
| | |

| 1. | Agency Name | | | Date Stamp | California 000 | | | |
|----|--|--|--------------------------------|---|--|--|--|--|
| | 22nd District Agricultural Association | | Form OUZ | | | | | |
| | Division, Department, or Region (if applicable) | | | 1 | For Official Use Only | | | |
| | CDFA | | | | | | | |
| | Designated Agency Contact (Name, Title) | 1 | | | | | | |
| | Timothy J. Fennell | | | Amendment (Must | Provide Explanation in Part 3.) | | | |
| | Area Code/Phone Number E-mail | | | | , | | | |
| | 858-755-1161 | | | Date of Original Filings | (month, day, year) | | | |
| 2. | Function or Event Information | | | | <u> </u> | | | |
| | Does the agency have a ticket policy? Yes | ⊠ No□ F | ace Value of | Each Ticket/Pass \$ 3 | 38 | | | |
| | Event Description: Gabriel Iglesias @ SDCF | | | <u> 30 </u> | | | | |
| | Provide Title/Expl | anation | | | | | | |
| | Ticket(s)/Pass(es) provided by agency? Yes | Name of Source | | | | | | |
| | Was ticket distribution made at the behest Yes | Vas ticket distribution made at the behest Yes ⊠ No ☐ If yes: Schenk | | | | | | |
| | of agency official? | | | Official's Name (Last, First, |) | | | |
| 3. | Recipients | | | | | | | |
| ٠. | • Use Section A to identify the agency's department or unit. | dual. • Use Section C to ide | ntify an outside organization. | | | | | |
| | | | | | | | | |
| | A. Name of Agency, Department or Unit | of Ticket(s)/ Passes | Describe tr | e 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: | | | | |
| | Schenk, Frederick | | | monial Role 🔲 Other I | | | | |
| | Contain, Fragorian | 2 | 5.3b) the of | cking "Ceremonial Role" or "Other" of ficial and/or iob duties | describe below: is of the District Official | | | |
| | | | | ner attendance at the | | | | |
| | | | | monial Role 🔲 Other I | | | | |
| | | | if ched | cking "Ceremonial Role" or "Other" o | describe below: | | | |
| | Management of the second of th | Number | | | | | | |
| | C. Name of Outside Organization (include address and description) | of Ticket(s)/ | Describe th | ne public purpose made pu | ırsuant to the agency's policy | | | |
| | According to the second | 1 03503 | 1 | | <u></u> | | | |
| | • | | | | | | | |
| | | | | | · | | | |
| | | | | | | | | |
| 4. | Verification | | | | | | | |
| | I have read and understand FPPC Regulations 1894 | 4.1 and 18942. | l have verified | that the distribution set | forth above, is in accordance | | | |
| • | with the requirements. | | | | | | | |
| | | hy J. Fennell | | CEO/General Manag | | | | |
| | Signature of Agency Head or Designee | Print Name | | Title | (month, day, year) | | | |
| | Comment: | | | | | | | |
| | 1. / | | | | | | | |