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

1. Agency Name
   Arts & Lectures
   Division, Department, or Region (if applicable)
   University of California
   Designated Agency Contact (Name, Title)
   Rachel Leslie, Manager of Ticketing Operations
   Area Code/Phone Number (805) 893-3458
   E-mail rachel.leslie@artsandlectures.ucsb.edu

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $ 75.00
   Event Description: Alan Cumming, performance
   Date(s) 04 / 18 / 19
   Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐
   If no: ____________________
   Name of Source ________
   Was ticket distribution made at the behest of agency official? Yes ☒ No ☐
   If yes: ____________________
   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
   UCSB Department of Music 2 Public Service
   UCSB Department of Theater/Dance 3 Public Service / Faculty & Department Chair

   B. Name of Individual (Last, First) | Number of Ticket(s)/Passes |
   Ceremonial Role ☐ Other ☐ Income ☐
   If checking 'Ceremonial Role' or 'Other' describe below:

   Ceremonial Role ☐ Other ☐ Income ☐
   If checking 'Ceremonial Role' or 'Other' describe below:

   C. Name of Outside Organization (include address and description) | Number of Ticket(s)/Passes | Describe the public purpose made pursuant to the agency’s policy

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.
   Roman Baratiak, Associate Director
   Signature
   Print Name
   Title
   (month, day, year)

Comment: ____________________________

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Arts & Lectures
   University of California
   Rachel Leslie, Manager of Ticketing Operations
   (805) 893-3458
e-mail: rachel.leslie@artsandlectures.ucsb.edu

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Face Value of Each Ticket/Pass $ 40.00
   Event Description: Anoushka Shankar, performance
   Date(s) 04 // 17 // 19
   Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐
   Name of Source
   Was ticket distribution made at the behest of agency official? Yes ☑ No ☐
   If yes: Official's Name (Last, First)

3. Recipients
   A. Name of Agency, Department or Unit | Number of Ticket(s)/Passes | Describe the public purpose made pursuant to the agency's policy
   UCSB Dhadkan                          | 20                           | Public Service / Pre-show class
   UCSB Department of Music               | 5                            | Public Service / Faculty
   B. Name of Individual (Last, First)   | Number of Ticket(s)/Passes   | Identify one of the following:
   Michael Kate Interiors & Art Gallery   | 3                            |
   132 Santa Barbara St, SB, CA 93101    | Public Service
   C. Name of Outside Organization       | Number of Ticket(s)/Passes   | Describe the public purpose made pursuant to the agency's policy
   (include address and description)      | 3                            |

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
   Roman Barettik, Associate Director
   Print Name
   Title
   Date: 4/2/19 (month, day, year)

Comment:

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK.FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Arts & Lectures
Division, Department, or Region (if applicable)
University of California
Designated Agency Contact (Name, Title)
Rachel Leslie, Manager of Ticketing Operations
Area Code/Phone Number
(805) 893-3458
E-mail
rachel.leslie@artsandlectures.ucsb.edu

2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No ☐
Face Value of Each Ticket/Pass $ 45.00
Event Description: Ballet Prejocaj, performance
Date(s) 04 / 16 / 19
Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐
If no: ___________________________
Name of Source _______________________
Was ticket distribution made at the behest of agency official? Yes ☑ No ☐
If yes: ___________________________
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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>UCSB Department of Theater/Dance</td>
<td>5</td>
<td>Public Service / Faculty</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consulate General of France in Los Angeles 10390 Santa Monica Blvd. Ste410, LA, 90025</td>
<td>4</td>
<td>Public Service</td>
</tr>
</tbody>
</table>

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

Roman Baratiak, Associate Director

Print Name

Title

4/2/19 (month, day, year)

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

1. Agency Name
   Arts & Lectures
   University of California
   Designated Agency Contact (Name, Title)
   Rachel Leslie, Manager of Ticketing Operations
   Area Code/Phone Number (805) 893-3458
   E-mail rachel.leslie@artsandlectures.ucsb.edu

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Event Description: Hot Club & Dustbowl Revival / Perf
   Face Value of Each Ticket/Pass $ 32.00
   Date(s) 04 / 02 / 19
   Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐
   Was ticket distribution made at the behest of agency official? Yes ☑ No ☐

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
      UCSB Music Dept
      UCSB Theater & Dance Dept
   B. Name of Individual (Last, First)
      N/A
   C. Name of Outside Organization (include address and description)
      N/A

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
   Roman Baratiak, Associate Director
   Print Name
   Title
   Date 3/19

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

1. Agency Name
   Arts & Lectures

   Division, Department, or Region (if applicable)
   University of California

   Designated Agency Contact (Name, Title)
   Rachel Leslie, Manager of Ticketing Operations

   Area Code/Phone Number   E-mail
   (805) 893-3458   rachel.leslie@artsandlectures.ucsb.edu

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐ Face Value of Each Ticket/Pass $ 35.00
   Event Description: Jennifer Koh / Performance
   Date(s) 04 / 12 / 19

   Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐
   If no: ____________________________
   Name of Source

   Was ticket distribution made at the behest of agency official? Yes ☑ No ☐
   If yes: ____________________________
   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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/ Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>UCSB Asian American Studies</td>
<td>2</td>
<td>Faculty</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B. Name of Individual</td>
<td>Number of Ticket(s)/ Passes</td>
<td>Identify one of the following:</td>
</tr>
<tr>
<td>(Last, First)</td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td>N/A</td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>C. Name of Outside Organization</td>
<td>Number of Ticket(s)/ Passes</td>
<td>Describe the public purpose made pursuant to the agency's policy</td>
</tr>
<tr>
<td>(include address and description)</td>
<td></td>
<td>Public Service</td>
</tr>
<tr>
<td>Santa Barbara Strings</td>
<td>14</td>
<td></td>
</tr>
<tr>
<td>PO Box 61401, Santa Barbara, CA 93160</td>
<td></td>
<td></td>
</tr>
<tr>
<td>SB Youth Symphony</td>
<td>8</td>
<td>Public Service</td>
</tr>
<tr>
<td>179 Nogal Dr, Santa Barbara, CA 93110</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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
   Roman Baratiak, Associate Director

   Date: 4/12/19
   (month, day, year)

   Comment: ____________________________

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Arts & Lectures
   Division, Department, or Region (if applicable)
   University of California
   Designated Agency Contact (Name, Title)
   Rachel Leslie, Manager of Ticketing Operations
   Area Code/Phone Number E-mail
   (805) 893-3458 rachel.leslie@artsandlectures.ucsb.edu

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐ Face Value of Each Ticket/Pass $ 40.00
   Event Description: Michael Pollan, lecture
   Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐ Date(s) 04 / 23 / 19 If no:
   Was ticket distribution made at the behest of agency official? Yes ☑ No ☐ Name of Source

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
   UCSB Department of Theater/Dance 2 Public Service / Department Chair

   B. Name of Individual (Last, First) Number of Ticket(s)/Passes Identify one of the following:
      Ceremonial Role ☐ Other ☐ Income ☐
      If checking “Ceremonial Role” or “Other” describe below:

   C. Name of Outside Organization (include address and description) Number of Ticket(s)/Passes Describe the public purpose made pursuant to the agency’s policy
      Dos Pueblos Little League 2 Public Service
      Address unknown, Goleta, CA 93117
      Silkroad Ensemble 175 N Harvard St, Allston, MA 02134 2 Public Service

4. Verification
   I have read and understand FRPC 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
   Roman Baratik, Associate Director
   Print Name
   Title
   (month, day, year) 4/24/19

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

**Date Stamp**

**California Form 802**

**For Official Use Only**

**□ Amendment (Must Provide Explanation in Part 3.)**

**Date of Original Filing: (month, day, year)**

### 1. Agency Name

**Arts & Lectures**

**Division, Department, or Region (if applicable)**

University of California

**Designated Agency Contact (Name, Title)**

Rachel Leslie, Manager of Ticketing Operations

**Area Code/Phone Number**

(805) 893-3458

**E-mail**

rachel.leslie@artsandlectures.ucsb.edu

### 2. Function or Event Information

**Does the agency have a ticket policy?**

Yes X No □

**Face Value of Each Ticket/Pass $**

43.00

**Event Description:**

Monterey Jazz Festival / Performance

**Date(s) 04 / 08 / 19**

**Ticket(s)/Pass(es) provided by agency?**

Yes X No □

**If no:**

Name of Source

**Was ticket distribution made at the behest of agency official?**

Yes X No □

**If yes:**

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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>UCSB Theater &amp; Dance Dept</td>
<td>2</td>
<td>Dept Chair</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Community Environmental Council 26 W Anapamu St, 2nd Floor, SB, CA 93101</td>
<td>2</td>
<td>Public Service</td>
</tr>
</tbody>
</table>

### 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**

**Roman Baratiak, Associate Director**

**Print Name**

**Title**

**4/11/19 (month, day, year)**

**Comment:**

FPPC Form 802 (2/2016)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Arts & Lectures
   Division, Department, or Region (if applicable)
   University of California
   Designated Agency Contact (Name, Title)
   Rachel Leslie, Manager of Ticketing Operations

   Area Code/Phone Number E-mail
   (805) 893-3458 rachel.leslie@artsandlectures.ucsb.edu

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Face Value of Each Ticket/Pass $ 28.00
   Event Description: So Percussion / Performance
   Date(s) 04 / 06 / 19
   Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐
   If no: ____________________________
   Name of Source ____________________________
   Was ticket distribution made at the behest of agency official? Yes ☑ No ☐
   If yes: ____________________________
   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
   UCSB History of Art & Architecture 2 Staff
   UCSB Administrative Services Division 6 Staff

   B. Name of Individual (Last, First) Number of Ticket(s)/Passes Identify one of the following:
   N/A

   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
   Yardi Systems
   430 S Fairview Ave, Goleta, CA 93117 50 Public Service

4. Verification
   I have read and understood 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 ____________________________
   Print Name ____________________________
   Title ____________________________
   Date (month, day, year) 4/11/19

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

1. Agency Name
   Arts & Lectures
   University of California

   Designated Agency Contact (Name, Title)
   Rachel Leslie, Manager of Ticketing Operations

   Area Code/Phone Number: (805) 993-3458
   E-mail: rachel.leslie@artsandlectures.ucsb.edu

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐ Face Value of Each Ticket/Pass $28.00

   Event Description: So Percussion / Performance

   Date(s) 04 / 06 / 19

   Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐

   If no: ____________________________
   Name of Source: ____________________________

   Was ticket distribution made at the behest of agency official? Yes ☑ No ☐

   If yes: ____________________________
   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

      UCSB History of Art & Architecture 2 Staff
      UCSB Administrative Services Division 6 Staff

   B. Name of Individual (Last, First)
      Number of Ticket(s)/Passes
      Identify one of the following:

      N/A

   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

      Yardi Systems 430 S Fairview Ave, Goleta, CA 93117 50 Public Service

4. Verification
   I have read and understood 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: ____________________________
   Print Name: ____________________________
   Title: ____________________________
   (Month, Day, Year): 4/11/19

Comment: ____________________________
## 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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/ Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>UCSB Admissions Office</td>
<td>2</td>
<td>Staff</td>
</tr>
<tr>
<td>UCSB Anthropology Dept</td>
<td>2</td>
<td>Staff</td>
</tr>
<tr>
<td>UCSB Black Studies Dept</td>
<td>4</td>
<td>Staff</td>
</tr>
<tr>
<td>UCSB California Nanosystems Institute</td>
<td>2</td>
<td>Staff</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/ Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>N/A</td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below.</td>
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<tr>
<th>C. Name of Outside Organization (include address and description)</th>
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<td></td>
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<tr>
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<td>UCSB Admissions Office</td>
<td>2</td>
<td>Staff</td>
</tr>
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<td>UCSB Anthropology Dept</td>
<td>2</td>
<td>Staff</td>
</tr>
<tr>
<td>UCSB Black Studies Dept</td>
<td>4</td>
<td>Staff</td>
</tr>
<tr>
<td>UCSB California Nanosystems Institute</td>
<td>2</td>
<td>Staff</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td>N/A</td>
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<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
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<tr>
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<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
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<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
<td>N/A</td>
</tr>
</tbody>
</table>
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Arts & Lectures
   Division, Department, or Region (if applicable)
   University of California
   Designated Agency Contact (Name, Title)
   Rachel Leslie, Manager of Ticketing Operations
   Area Code/Phone Number
   (805) 893-3458
   E-mail
   rachel.leslie@artsandlectures.ucsb.edu
   Date Stamp

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Face Value of Each Ticket/Pass $ 28.00
   Event Description: So Percussion / Performance
   Provide Title/Explanation
   Date(s) 04 / 06 / 19
   Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐
   If no: ________________________________
   Name of Source
   If yes: ________________________________
   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.
   
<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/ Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>UCSB Career Services</td>
<td>6</td>
<td>Staff</td>
</tr>
<tr>
<td>UCSB Children's Center</td>
<td>4</td>
<td>Staff</td>
</tr>
</tbody>
</table>
   
<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/ Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
<td>Ceremonial Role ☑ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☑ Other ☐ Income ☐</td>
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</table>
   
<table>
<thead>
<tr>
<th>Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/ Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>N/A</td>
<td></td>
</tr>
</tbody>
</table>

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 __________________________
   Print Name ____________________________________________
   Title ____________________________________________
   Date Stamp 4/1/19 (month, day, year)
   Comment: ____________________________________________
### 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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>UCSB Counseling, Clinical, and School Psych</td>
<td>2</td>
<td>Staff</td>
</tr>
<tr>
<td>UCSB Davidson Library</td>
<td>2</td>
<td>Staff</td>
</tr>
<tr>
<td>UCSB Education Abroad Program</td>
<td>6</td>
<td>Staff</td>
</tr>
<tr>
<td>UCSB Electrical and Computer Engineering</td>
<td>2</td>
<td>Staff</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
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</tr>
<tr>
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<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
<td>N/A</td>
</tr>
</tbody>
</table>
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Arts & Lectures
   Division, Department, or Region (if applicable)
   University of California
   Designated Agency Contact (Name, Title)
   Rachel Leslie, Manager of Ticketing Operations

<table>
<thead>
<tr>
<th>Area Code/Phone Number</th>
<th>E-mail</th>
</tr>
</thead>
<tbody>
<tr>
<td>(805) 893-3458</td>
<td><a href="mailto:rachel.leslie@artsandlectures.ucsb.edu">rachel.leslie@artsandlectures.ucsb.edu</a></td>
</tr>
</tbody>
</table>

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐ Face Value of Each Ticket/Pass $ 28.00
   Event Description: So Percussion / Performance
   Date(s) 04 / 06 / 19
   Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐ If no: ________________________________
   Was ticket distribution made at the behest of agency official? Yes ☑ No ☐ If yes: ________________________________

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.

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<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>UCSB English Dept</td>
<td>2</td>
<td>Faculty</td>
</tr>
<tr>
<td>UCSB Enterprise Technology Services</td>
<td>2</td>
<td>Staff</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
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</table>

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: ____________________________

   Roman Baratik, Associate Director
   Date: 4/11/19 (month, day, year)

   Comment: ________________________________________________________

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (886/275-3772)
### 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.

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<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>UCSB Facilities Management</td>
<td>2</td>
<td>Staff</td>
</tr>
<tr>
<td>UCSB Film &amp; Media Studies Dept</td>
<td>4</td>
<td>Staff</td>
</tr>
<tr>
<td>UCSB Geography Dept</td>
<td>2</td>
<td>Faculty</td>
</tr>
<tr>
<td>UCSB Health and Wellness</td>
<td>2</td>
<td>Staff</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
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<tr>
<td>N/A</td>
<td></td>
<td>Ceremonial Role □ Other □ Income □</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role □ Other □ Income □</td>
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Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Arts & Lectures
   Division, Department, or Region (if applicable)
   University of California
   Designated Agency Contact (Name, Title)
   Rachel Leslie, Manager of Ticketing Operations
   Area Code/Phone Number
   (805) 893-3458
   E-mail
   rachel.leslie@artsandlectures.ucsb.edu

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Face Value of Each Ticket/Pass $28.00
   Event Description: So Percussion / Performance
   Date(s): 04 / 06 / 19
   Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐
   If no: ____________________________
   Name of Source
   Was ticket distribution made at the behest of agency official? Yes ☑ No ☐
   If yes: ____________________________
   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.

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>UCSB Information Systems &amp; Computing Dept</td>
<td>2</td>
<td>Staff</td>
</tr>
<tr>
<td>UCSB Institutional Advancement Division</td>
<td>4</td>
<td>Staff</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following: ______________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>N/A</td>
<td>Ceremonial Role ☑ Other ☐ Income ☐</td>
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<tr>
<td>N/A</td>
<td>N/A</td>
<td></td>
</tr>
</tbody>
</table>

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
   [Signature]
   Print Name
   Roman Baratiak, Associate Director
   Title
   Date: 4/11/19 (month, day, year)

   Comment: ____________________________

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
### 3. Recipients

- Use Section A to identify the agency's department or unit.  
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<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>UCSB Instructional Development Dept</td>
<td>2</td>
<td>Staff</td>
</tr>
<tr>
<td>UCSB Letters &amp; Science IT Dept</td>
<td>4</td>
<td>Staff</td>
</tr>
<tr>
<td>UCSB Marine Science Institute</td>
<td>2</td>
<td>Staff</td>
</tr>
<tr>
<td>UCSB Materials Dept</td>
<td>2</td>
<td>Staff</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>0</td>
<td>Ceremonial Role  Other  Income</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
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Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Arts & Lectures
   Division, Department, or Region (if applicable)
   University of California
   Designated Agency Contact (Name, Title)
   Rachel Leslie, Manager of Ticketing Operations
   Area Code/Phone Number E-mail
   (805) 893-3458 rachel.leslie@artsandlectures.ucsb.edu

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $ 28.00
   Event Description: So Percussion / Performance
   Date(s) 04 / 06 / 19
   Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐
   If no: Name of Source
   If yes: Official's Name (Last, First)

3. Recipients
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</tr>
</thead>
<tbody>
<tr>
<td>UCSB Mechanical Engineering Dept</td>
<td>2</td>
<td>Faculty</td>
</tr>
<tr>
<td>UCSB Media Arts &amp; Technology Program</td>
<td>2</td>
<td>Faculty</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
<th>Ceremonial Role ☐ Other ☐ Income ☐</th>
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<td>N/A</td>
<td></td>
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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: [Signature]
   Print Name: [Print Name]
   Title: [Title]
   Date: 04/11/19 (month/day/year)

Comment: [Comment]
### 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.

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<th>Describe the public purpose made pursuant to the agency's policy</th>
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</thead>
<tbody>
<tr>
<td>UCSB Molecular, Cellular &amp; Developmental Biology</td>
<td>2</td>
<td>Staff</td>
</tr>
<tr>
<td>UCSB Music Dept</td>
<td>18</td>
<td>Staff/Faculty</td>
</tr>
<tr>
<td>UCSB Neuroscience Research Institute</td>
<td>2</td>
<td>Staff</td>
</tr>
<tr>
<td>UCSB Office of Research</td>
<td>2</td>
<td>Staff</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last First)</th>
<th>Number of Ticket(s)/Passes</th>
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<tbody>
<tr>
<td>N/A</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

| N/A                                                                    |                            |                               |

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

| N/A                                                                    |                            |                               |

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

| N/A                                                                    |                            |                               |

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Ceremonial Role Events and Ticket/Pass Distributions

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   Area Code/Phone Number
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   Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass $28.00
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   Date(s) 04 / 06 / 19
   Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐ If no:
   Name of Source
   If yes:
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<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>UCSB Political Science Dept</td>
<td>2</td>
<td>Staff</td>
</tr>
<tr>
<td>UCSB Psychological &amp; Brain Sciences Dept</td>
<td>8</td>
<td>Faculty/Staff</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
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   Signature of Agency Head or Designee

   Roman Baratisk, Associate Director
   Date: 4/11/19

Comment:
### 3. Recipients

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<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>UCSB Public Affairs Office</td>
<td>2</td>
<td>Staff</td>
</tr>
<tr>
<td>UCSB Registrar's Office</td>
<td>2</td>
<td>Staff</td>
</tr>
<tr>
<td>UCSB Spanish &amp; Portuguese Dept</td>
<td>2</td>
<td>Staff</td>
</tr>
<tr>
<td>UCSB Summer Sessions</td>
<td>4</td>
<td>Staff</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/ Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
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<td></td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/ Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td>N/A</td>
<td></td>
</tr>
</tbody>
</table>
Agency Report of: 
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Arts & Lectures
   Division, Department, or Region (if applicable)
   University of California
   Designated Agency Contact (Name, Title)
   Rachel Leslie, Manager of Ticketing Operations
   Area Code/Phone Number
   (805) 893-3458
   E-mail
   rachel.leslie@artsandlectures.ucsb.edu

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No □ 
   Face Value of Each Ticket/Pass $ 28.00
   Event Description: So Percussion / Performance
   Date(s) 04/06/19
   Ticket(s)/Pass(es) provided by agency? Yes ☑ No □
   If no: Name of Source
   If yes: 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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>UCSB Theater &amp; Dance Dept</td>
<td>2</td>
<td>Dept Chair</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
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<tr>
<td>N/A</td>
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<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
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<td></td>
<td></td>
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<tr>
<td>N/A</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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
   Roman Baratiak, Associate Director
   Date: 4/11/19 (month, day, year)

Comment: ____________________________

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. **Agency Name**
   Arts & Lectures

   **Division, Department, or Region (if applicable)**
   University of California

   **Designated Agency Contact (Name, Title)**
   Rachel Leslie, Manager of Ticketing Operations

   **Area Code/Phone Number**
   (805) 893-3458

   **E-mail**
   rachel.leslie@artsandlectures.ucsb.edu

2. **Function or Event Information**
   - **Does the agency have a ticket policy?** Yes ☑ No ☐
   - **Face Value of Each Ticket/Pass** $33.00
   - **Event Description**
     The Gloaming / Performance
   - **Date(s)**
     04 / 14 / 19
   - **Ticket(s)/Pass(es) provided by agency?**
     Yes ☑ No ☐
   - **Was ticket distribution made at the behest of agency official?**
     Yes ☑ No ☐

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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
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   * If checking "Ceremonial Role" or "Other" describe below:

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<tr>
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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 and Agency Head or Designee: [Signature]  Roman Baratik, Associate Director  
   Print Name:  [Name]  Title:  

   [Signature]  [Date] (Month, Day, Year)

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

1. Agency Name
   Arts & Lectures
   University of California
   Rachel Leslie, Manager of Ticketing Operations

   Area Code/Phone Number: (805) 893-3458
   E-mail: rachel.leslie@artsandlectures.ucsb.edu

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Event Description: Ukulele Orchestra / Performance
   Face Value of Each Ticket/Pass $ 43.00
   Date(s): 04 / 04 / 19
   Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐
   Was ticket distribution made at the behest of agency official? Yes ☒ No ☐

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.

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
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</thead>
<tbody>
<tr>
<td>Alpha Resource Center 4501 Cathedral Oaks Rd, SB, CA 93110</td>
<td>2</td>
<td>Public Service</td>
</tr>
<tr>
<td>Dos Pueblos Little League Goleta, CA 93117</td>
<td>2</td>
<td>Public Service</td>
</tr>
</tbody>
</table>

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.
   Roman Baratik, Associate Director
   Signature of Agency Head or Designee
   Print Name
   Title
   Date: 4/10/19

Comment: