Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name California Date Stamp Arts & Lectures For Official Use Only Division, Department, or Region (if applicable) University of California Designated Agency Contact (Name, Title) Rachel Leslie, Ticket Office Manager ☐ Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number Date of Original Filing: _ rachel.leslie @arts and lectures.ucsb.edu 805-893-3458 (month, day, year) 2. Function or Event Information Yes ☑ No ☐ Face Value of Each Ticket/Pass \$ 37 Does the agency have a ticket policy? Event Description: Calidore String Quartet Date(s) 2 / 11 / Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐ Was ticket distribution made at the behest Yes ☒ No ☐ If yes: _ 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 Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ Passes Faculty **UCSB Music Department** 5 UCSB Theater and Dance Dept Dept Chair 2 Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) Passes Income _ Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below: Income Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy C. of Ticket(s)/ (include address and description) Passes Public Service/Morale Music Teachers Association 8 1141 N Patterson Ave Santa Barbara 93111 4. Verification I have read and understand FPRC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements. Roman Baratiak, Associate Director

Print Name

Signature of Agency Head or Designee

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name California Date Stamp Arts & Lectures Form For Official Use Only Division, Department, or Region (if applicable) University of California Designated Agency Contact (Name, Title) Rachel Ledie, Ticket Office Manager ☐ Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail rachel.leslie@arts and lectures.ucsb. edu Date of Original Filing: . 805-893-3458 (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 49 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Compagnie Accrorap/Dance Perf Ticket(s)/Pass(es) provided by agency? Yes ☑ No □ If no: _ 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 Name of Agency, Department or Unit Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ Passes **UCSB Theater and Dance** Faculty 6 Number B. Name of Individual of Ticket(s)/ Identify one of the following: (Last, First) 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: Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ (include address and description) Passes Cirque Eloize Company Public Service/Morale 15 417 Berri St Montreal, PQ CanadaH2Y 3E1

· ·	verilleation	

I have read and understand FF	PPC Regulations	18944.1 and	18942. I have	e verified that the	distribution set	forth above,	is in accordance
with the requirements A	1						

Roman Baratial Associate Director

Comment:

Varification

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California Arts & Lectures For Official Use Only Division, Department, or Region (if applicable) University of California Designated Agency Contact (Name, Title) Rachel Lestie, Ticket Office Manager Area Code/Phone Number | E-mail ☐ Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _ 805-893-3458 rachel.leslie@artsandlectures.ucsb.edu (month, day, year) 2. Function or Event Information Yes ⊠ No ☐ Face Value of Each Ticket/Pass \$ 20 Does the agency have a ticket policy? Event Description: Banff/ Film Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No □ If no: __ Was ticket distribution made at the behest Yes ☒ No ☐ If yes: _ of agency official? Recipients · Use Section A to identify the agency's department or unit. · Use Section B to identify an individual. · Use Section C to identify an outside organization. Number Name of Agency, Department or Unit Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ **Passes** Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) **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: Number Name of Outside Organization of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy (include address and description) Passes Draughtsmen Aleworks Public Service/Morale 3

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

Roma Bartile Associate Director

4. Verification

Comment:

with the requirements

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

A Public Document

1.	Agency Name			Date Stamp	California OOO
	Arts & Lectures				Form OUZ
	Division, Department, or Region (if applicable)			1	For Official Use Only
	University of California				
	Designated Agency Contact (Name, Title)				
	Rachel Leslie, Ticket Office Ma	anager		Amondment (Must Bro	vide Explanation in Part 3.)
	Area Code/Phone Number E-mail	0		Amendment (Wast Fro	vide Explanation in Part 3.)
	805-893-3458 rachel·leslie@arts	sandlecture	S. ucsb.edu	Date of Original Filing:	(month, day, year)
2	Function or Event Information				
			Face Value of I	Each Ticket/Pass \$ 20	
	Event Description: Banff/ Film Provide Title/ Expla	nation [Date(s)		
			f no:		
				Name of Source	
	Was ticket distribution made at the behest Yes	⊠ No 🗆 🖠	f yes:	Official's Name (Last, First)	
	of agency official?			and a rame (200), rively	
3.	Recipients				
٠.	• Use Section A to identify the agency's department or unit.	Use Section B to	identify an individ	ual. • Use Section C to identify	v an outside organization.
		Number			
	A. Name of Agency, Department or Unit	of Ticket(s)/ Passes	Describe the	e public purpose made pursu	ant to the agency's policy
			1		
	B. Name of Individual	Number of Ticket(s)/		Identify one of the foll	owing:
	(Last, First)	Passes			3
		1		onial Role Other	Income
			If checki	ing "Ceremonial Role" or "Other" descri	be below:
			ļ		
				onial Role Other Other	Income
			ii checki	ing "Ceremonial Role" or "Other" descri	be below.
		Number			
	C. Name of Outside Organization (include address and description)	of Ticket(s)/	Describe the	public purpose made pursu	ant to the agency's policy
		Passes	Public Service	o (Manala	
	Draughtsmen Aleworks	3	Public Service	eriviorale	
1	Verification				
	I have read and understand FPPC Regulations 18944	1 and 18942	I have verified th	hat the distribution set fort	h ahove is in accordance
	with the requirements.	_ \	1	A	/ doctrumed
	Bank David	Baret	ich Aca	ochte Doct	- 4/19/18
	Signature of Agency Head or Designee Pr	int Name	1677	Title	(month day, year)
	C				, ,
	Comment:				

C	eremonial Role Events and Ticket/	Pass Disti	ributions	Α	Public Document
	Agency Name			Date Stamp	0-1:5
	Arts & Lectures				Form 802
	Division, Department, or Region (if applicable)			1	For Official Use Only
	University of California			-	
	Designated Agency Contact (Name, Title)			1	
	Rachel Leslie, Ticket Office Area Code/Phone Number E-mail	Manager			
	Area Code/Phone Number E-mail	3		. Must P	Provide Explanation in Part 3.)
	805-893-3458 rachel.leslie@a	rtsandlectur	es.ucsb.edu	Date of Original Filing:	(month, day, year)
2.	Function or Event Information				
	Does the agency have a ticket policy? Yes	⊠ No □	Face Value of I	Each Ticket/Pass \$ 25	5
	Event Description: Danish String Quartet/ Perfo	ormance	Date(s)2	, 23 , 18	
	Provide Title/ Expl	anation	Date(s)		
	Ticket(s)/Pass(es) provided by agency? Yes	⊠ No □ I	f no:		
	Was ticket distribution made at the behest Yes		f voc:	Name of Source	
	of agency official?	⊠ No □ I	i yes	Official's Name (Last, First)	
	or agency emotal:				
3.	Recipients				
	 Use Section A to identify the agency's department or unit. 	• Use Section B to	identify an individ	ual. • Use Section C to identi	ify an outside organization.
	A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the	e public purpose made purs	suant to the agency's policy
	KCSB Radio	2	Public Service	e/Morale	
	UCSB Chemical Engineering Department	2	Public Servic	:e/Morale	
	B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes		Identify one of the fo	llowing:
			200725	onial Role Other on "Other on "Other" descriptions	Income In
				onial Role Other on "Other" descriptions of "Ceremonial Role" or "Other" descriptions of the control of the con	Income Income
	C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the	public purpose made purs	uant to the agency's policy
	Music Teachers Association 1141 N Patterson Ave SB CA 93111	6	Public Service	e/Morale	
ŀ.	Verification				
_	I have read and understand FPPO Regulations 18944 with the requirements.		have verified th		th above, is in accordance
	Signature of Agency Head or Designee Pr	rint Name		Title	(phonth, day, year)
	Comment:				,

Agency Report of:



O Bestellants		
Arts & Lectures		
Agency Name		

Recipients

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	dentify an individual. • Use Section C to identify an outside organization. Describe the public purpose made pursuant to the agency's policy
UCSB History Dept	2	Public Service/Morale
UCSB Music Dept	9	Public Service/Morale
UCSB Theater and Dance Dept	2	Dept Chair
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role Other Income
		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role Other Income 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
7.4.		

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name California Date Stamp **Form** Arts & Lectures For Official Use Only Division, Department, or Region (if applicable) University of California Designated Agency Contact (Name, Title) Rachel Leslit, Ticket Office Manager Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number Date of Original Filing: _ rachel.leslie@artsandlectures.ucsb.edu 805-893-3458 (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 35 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Matthew Desmond Date(s) 2 / 22 / Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐ Was ticket distribution made at the behest Yes ☒ No ☐ If yes: _ Official's Name (Last, First) of agency official? Recipients • Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization. Number Name of Agency, Department or Unit of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy **Passes KCSB** Public Service/Morale 2 Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) **Passes** Ceremonial Role Other \square Income If checking "Ceremonial Role" or "Other" describe below Income Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below. Number Name of Outside Organization C. Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ (include address and description) Passes Public Service/Morale Yardi System 40 430 S Fairview Ave Goleta CA 93117 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 of Agency Head or Designee

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name California Date Stamp Arts & Lectures For Official Use Only Division, Department, or Region (if applicable) University of California Designated Agency Contact (Name, Title) Rachel Leslie, Ticket Office Manager ☐ Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number Date of Original Filing: _ 805-893-3458 rachel.leslie@artsandlectures.ucsb.edu (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 20 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Tony Kushner & Sarah Vowell Date(s) _2 / 20 / Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ⊠ No □ Was ticket distribution made at the behest Yes ☒ No ☐ If yes: _ of agency official? Recipients • Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization. Number Name of Agency, Department or Unit A. Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ **Passes** UCSB Executive Vice Chancellors Office Administration 2 UCSB Humanities and Fine Arts Public Service/Morale 4 Number B. Name of Individual Identify one of the following: of Ticket(s)/ (Last, First) **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: Number Name of Outside Organization of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy (include address and description) Passes SB Unified School District Public Service/Morale 2 720 Santa Barbara St SB CA 93101

4. Verification

Comment: _

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

2	Roman Baratiak,	Associate Director	2/22/18
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)



Agency Name		
Arts & Lectures		

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 Theater and Dance Dept	1	Faculty
UCSB Theater and Dance Dept	2	Department Chair
UCSB Theater and Dance Dept	2	Public Service/Morale
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role Other Income
		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California **Form** Arts & Lectures For Official Use Only Division, Department, or Region (if applicable) University of California Designated Agency Contact (Name, Title) Rachel Leslie, Ticket Office Manager rea Code/Phone Number [E-mail ☐ Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: . 805-893-3458 rachel·leslie@artsandlectures.ucsb.edu (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ $\frac{25}{}$ Does the agency have a ticket policy? Yes⊠ No□ Event Description: Terry Virts/ Lecture Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No □ Was ticket distribution made at the behest Yes ☒ No ☐ 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 Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ **Passes** Number Name of Individual Identify one of the following: B. of Ticket(s)/ (Last, First) **Passes** Income Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below: Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy C. of Ticket(s)/ (include address and description) Passes Public Service/ Morale La Colina Junior High School 2 4025 Foothill Rd Santa Barbara CA 93110 Public Service/ Morale Peabody Charter School 4 3018 Calle Noguera Santa Barbara CA 93105 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 Print Name Signature of Agency Head or Designee



gency Name		
s & Lectures Recipients		
	it. • 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
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:
		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role Other Income 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
Wyatt Technology Corp. 6300 Hollister Ave Goleta CA 93117	62	Public Service/ Morale
27 y		

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California **Form** Arts & Lectures For Official Use Only Division, Department, or Region (if applicable) University of California Designated Agency Contact (Name, Title) Rachel Leslie, Ticket Office Manager Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number Date of Original Filing: _ 805-893-3458 rachel.leslie@artsandlectures.ucsb.edu (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 42 Does the agency have a ticket policy? Yes⊠ No□ Event Description: Mike Birbiglia/ Performance Date(s) 2 / 9 / Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐ 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 Name of Agency, Department or Unit of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy **Passes UCSB Theater and Dance** Dept Chair 2 Number B. Name of Individual of Ticket(s)/ Identify one of the following: (Last, First) Passes Ceremonial Role Income If checking "Ceremonial Role" or "Other" describe below Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below Number Name of Outside Organization C. Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ (include address and description) **Passes**

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

Signature of Agency Head or Designee Print Name Associate Treduce

4. Verification

with the requirements.

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name California Date Stamp Form Arts & Lectures For Official Use Only Division, Department, or Region (if applicable) University of California Designated Agency Contact (Name, Title) Rachel Leslie, Ticket Office Manager Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number Date of Original Filing: 805-893-3458 rachel. Ieslie@artsandlectures.ucsb. edu (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 49 Does the agency have a ticket policy? Yes⊠ No□ Event Description: Cameron Carpenter/ Performance Date(s) 2 / 12 / Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No □ 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 Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ Passes **UCSB Music Dept** Public Service/Morale 4 Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) Passes Ceremonial Role Other _ Income If checking "Ceremonial Role" or "Other" describe below: Income Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy C. (include address and description) **Passes** Public Service/Morale Music Teachers Association 24 1141 N Patterson Ave SB 93111 4. Verification I have read and understand-EPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements. oundrik Associate Direct Signature of Agency Head or Designee

Ceremonial Role Events and Ticket/Pass Distributions A Public Document Date Stamp 1. Agency Name Form Arts & Lectures For Official Use Only Division, Department, or Region (if applicable) University of California Designated Agency Contact (Name, Title) Rachel Leslie, Ticket Office Manager
a Code/Phone Number [E-mail Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _ 805-893-3458 rachel leslie@artsandlectures.ucsb.edu (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 25 Does the agency have a ticket policy? Yes⊠ No□ Event Description: Cudamani/Performance Date(s) 2 / 21 / Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No □ If yes: _ 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 Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ Passes Staff Academic Personnel 4 Staff Admissions Office 4 Number Name of Individual Identify one of the following: B. of Ticket(s)/ (Last, First) Passes Income Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below: Income Other Ceremonial Role If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ (include address and description) Passes 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 Bartisle Associate Directo

Agency Report of:

Comment: ___



	A Public Document
• Use Section B to	identify an individual. • Use Section C to identify an outside organization.
Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
2	Staff
2	Staff
2	Staff
4	Staff
Number of Ticket(s)/ Passes	Identify one of the following:
	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
	Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:
	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
Number of Ticket(s)/	Describe the public purpose made pursuant to the agency's policy
	Number of Ticket(s)/ Passes 2 2 4 Number of Ticket(s)/ Passes

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California Form Arts & Lectures For Official Use Only Division, Department, or Region (if applicable) University of California Designated Agency Contact (Name, Title) Rachel Leslie, Ticket Office Manager ☐ Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number Date of Original Filing: _ 805-893-3458 rachel leslie@artsandlectures.uab.edu (month, day, year) 2. Function or Event Information Yes ⊠ No ☐ Face Value of Each Ticket/Pass \$ 25 Does the agency have a ticket policy? Event Description: Cudamani/Performance Date(s) 2 / 21 / Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐ Was ticket distribution made at the behest Yes ☒ No ☐ If yes: _ 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 Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ Passes Staff Central Development 4 College of Creative Studies Faculty 3 Number Name of Individual B. Identify one of the following: (Last, First) Passes Other Ceremonial Role Income If checking "Ceremonial Role" or "Other" describe below: Income Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ C. (include address and description) Passes 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 Bardisk Associate Drede



gency Name s & Lectures		
Recipients	iit. • 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
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:
		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role Other Income 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
College of Engineering	2	Staff
Davidson Library	2	Staff
Design and Construction Services	2	Staff
Dining Services	2	Staff

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California Form Arts & Lectures For Official Use Only Division, Department, or Region (if applicable) University of California Designated Agency Contact (Name, Title) Rachel Leslie, Ticket Office Manager ☐ Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number Date of Original Filing: _ 805-893-3458 machel.leslie@artsandlectures.ucsb.edu (month, day, year) 2. Function or Event Information Yes ☑ No ☐ Face Value of Each Ticket/Pass \$ 25 Does the agency have a ticket policy? Event Description: Cudamani/Performance Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No □ Was ticket distribution made at the behest Yes ☒ No ☐ If yes: _ of agency official? Recipients · Use Section A to identify the agency's department or unit. · Use Section B to identify an individual. · Use Section C to identify an outside organization. Number Name of Agency, Department or Unit Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ Passes **Ecology Evolution and Marine Bio** Faculty 2 EOP Staff 6 Number B. Name of Individual Identify one of the following: of Ticket(s)/ (Last, First) **Passes** Income Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below: Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy (include address and description) Passes 4. Verification

4. Verincation

	egulations 18944.1 and 18942. I have v	erified that the distribution set forth ab	ove, is in accordanc
with the requirements.	- \ \ \	n - 1	.1) .
REDIA	Roman Barchick	Assoc. Director	4/19/18
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)
Comment:			

3.



gency Name & Lectures				
Recipients		• Liea Saction B to	identify an individual. • Use Section C to identify an outside organization.	
	e of Agency, Department or Unit	Number of Ticket(s)/	Describe the public purpose made pursuant to the agency's policy	
	7	*		
В.	Name of Individual	Number of Ticket(s)/	Identify one of the following:	
	(Last, First)	Passes	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:	
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:	
· · · · · · · · · · · · · · · · · · ·			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:	
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:	
C. (in	Name of Outside Organization clude address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy	
Education D	Department	4	Faculty	
Electrical an	nd Comp. Engineering	2	Faculty	
Engineering	Science Program	2	Staff	
English Dep	ot	4	Faculty	

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name California Date Stamp Form Arts & Lectures For Official Use Only Division, Department, or Region (if applicable) University of California Designated Agency Contact (Name, Title) Rachel Leslie, Ticket Office Manager ☐ Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: . rachel.leslie@artsandlectures.ucsb.edu 805-893-3458 (month, day, year) 2. Function or Event Information Yes ☑ No ☐ Face Value of Each Ticket/Pass \$ 25 Does the agency have a ticket policy? Event Description: Cudamani/Performance Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No □ Was ticket distribution made at the behest Yes ☒ No ☐ of agency official? Recipients · Use Section A to identify the agency's department or unit. · Use Section B to identify an individual. · Use Section C to identify an outside organization. Number Name of Agency, Department or Unit Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ Passes **Enterprise Tech Services** Staff 2 **Executive Vice Chancellors Office** Staff 2 Number B. Name of Individual Identify one of the following: of Ticket(s)/ (Last, First) **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 Number Name of Outside Organization C. of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy (include address and description) 4. Verification

Comment: ____

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

Baretial Associate Director

with the requirements,

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	pients		
• Use Se	ection 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
В.	Name of Individual	Number of Ticket(s)/	Identify one of the following:
	(Last, First)	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:
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
C.	Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
Finan	icial Aid Offcie	4	Staff
Geog	raphy Dept	2	Staff
Gift A	dmin	2	Staff
Globa	al & International Studies Program	2	Faculty

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name California Date Stamp **Form** Arts & Lectures For Official Use Only Division, Department, or Region (if applicable) University of California Designated Agency Contact (Name, Title) Rachel Leslie, Ticket Office Manager Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: . rachelleslie@arts and lectures.ucab.edu 805-893-3458 (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ $\frac{25}{}$ Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Cudamani/Performance Date(s) 2 / 21 / Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No □ Was ticket distribution made at the behest Yes ☒ No ☐ of agency official? Recipients • Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization. Number Name of Agency, Department or Unit Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ Passes Graduate Division Staff 6 Graduate School of Ed Staff 4 Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) Passes Ceremonial Role Other Income ... If checking "Ceremonial Role" or "Other" describe below: Income Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy C. (include address and description) Passes 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 Bardick Associate Director



gency Name s & Lectures		
Recipients	• 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
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role Other Income 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
Housing/Residential Services	6	Staff
Human Resources	8	Staff
Humanities and Fine Arts	2	Staff
Instructional Development Dept	2	Staff

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document California Date Stamp 1. Agency Name Form Arts & Lectures For Official Use Only Division, Department, or Region (if applicable) University of California Designated Agency Contact (Name, Title) Rachel Leglie Ticket Office Manager
Area Code/Phone Number | E-mail ☐ Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _ 805-893-3458 rachel.leslie@artsandlectures.ucsb.edu (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 25 Does the agency have a ticket policy? Yes⊠ No□ Event Description: Cudamani/Performance Date(s) 2 / 21 / Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐ Was ticket distribution made at the behest Yes ☒ No ☐ If yes: _ 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 Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ Passes Staff International Students and Scholars Office 4 Staff Marine Science Institute 2 Number Name of Individual Identify one of the following: B. of Ticket(s)/ (Last, First) Passes Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: Income Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ C. (include address and description) **Passes** 4. Verification I have read and understand FPRC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements Romer Burdisk Associate Directe

Comment: ___

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gency Name s & Lectures					
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			
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:			
		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:			
		Ceremonial Role Other Income			
		Ceremonial Role Other Income 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			
Music Dept	4	Faculty			
Music Dept	2	Staff			
Ombuds Office	2	Staff			
Procurement Services	2	Staff			

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California **Form** Arts & Lectures For Official Use Only Division, Department, or Region (if applicable) University of California Designated Agency Contact (Name, Title) Rachel Leslie, Ticket Office Manager ☐ Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: . rachel.leslie@artsandlectures.ucsb.edu 805-893-3458 (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ $\frac{25}{}$ Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Cudamani/Performance 21 / Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No □ Was ticket distribution made at the behest Yes ☒ No ☐ of agency official? Recipients • Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization. Number Name of Agency, Department or Unit Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ Passes Religious Studies Dept Faculty 2 SIST Staff 2 Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) 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: Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ (include address and description) **Passes** 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. peretial Associate Director

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gency Name s & Lectures			
Recipients	10.000		
Use Section A to identify the agency's of A. Name of Agency, Department		• Use Section B to Number of Ticket(s)/ Passes	identify an individual. • Use Section C to identify an outside organization. Describe the public purpose made pursuant to the agency's policy
B. Name of Individu	al	Number of Ticket(s)/ Passes	Identify one of the following:
			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
C. Name of Outside Organ		Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
Transportation and Parking S	ervices	2	Staff
UCEN Operations Dept		2	Staff

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California **Form** Arts & Lectures Division, Department, or Region (if applicable) For Official Use Only University of California Designated Agency Contact (Name, Title) Rachel Leslie, Ticket Office Manager Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number Date of Original Filing: _ 805-893-3458 rachel.leslie@artsandlectures.ucsb.edu (month, day, year) 2. Function or Event Information Yes ⊠ No ☐ Face Value of Each Ticket/Pass \$ 69 Does the agency have a ticket policy? Event Description: Cirque Eloize/ Performance Date(s) 2 / 7 / Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐ If no: _ Was ticket distribution made at the behest Yes ☒ No ☐ If yes: _ of agency official? Recipients • Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization. Number Name of Agency, Department or Unit Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ **Passes** Number Name of Individual B. of Ticket(s)/ Identify one of the following: (Last, First) Passes Ceremonial Role Other \square Income If checking "Ceremonial Role" or "Other" describe below. Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization C. Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ (include address and description) Passes Public Service/ Morale Adams Elementary School 20 2701 Las Positas Rd SB 93105 Adelante Charter Public Service/ Morale 12 1102 E Yanonali St SB 93103 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. OMAN BARATIAK ASSOCIATE DIRECTOR

Print Name

Title Signature of Agency Head or Designee



gency Name				
& Lectures Recipients • Use Section A to identify the agency's department or unit.	• Use Section B to	identify an individual. • Use Section C to identify an outside organization.		
A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy		
	Number			
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:		
		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:		
		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:		
		Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:		
		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:		
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy		
Alpha Resource Center 4501 Cathedral Oaks Rd SB 93110	12	Public Service/ Morale		
Casa Dorinda 300 Hot Springs Rd SB 93108	2	Public Service/ Morale		
Franklin Elementary 1111 E Mason St SB 93103	12	Public Service/ Morale		
Garden St Academy 2300 Garden St SB 93105	4	Public Service/ Morale		

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name California Date Stamp **Form** Arts & Lectures For Official Use Only Division, Department, or Region (if applicable) University of California Designated Agency Contact (Name, Title) Rachel Leslie, Ticket Office Manager rea Code/Phone Number | E-mail Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number Date of Original Filing: -805-893-3458 rachel. leslie Qarts and lectures. UCSb. edu (month, day, year) 2. Function or Event Information Yes ⊠ No ☐ Face Value of Each Ticket/Pass \$ 69 Does the agency have a ticket policy? Event Description: Cirque Eloize/ Performance Date(s) 2 / 7 / Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐ If no: _ Was ticket distribution made at the behest Yes ☒ No ☐ If yes: __ Official's Name (Last, First) of agency official? Recipients · Use Section A to identify the agency's department or unit. · Use Section B to identify an individual. · Use Section C to identify an outside organization. Number Name of Agency, Department or Unit of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy **Passes** Number B. Name of Individual Identify one of the following: of Ticket(s)/ (Last, First) Passes Other Ceremonial Role Income If checking "Ceremonial Role" or "Other" describe below. Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization C. Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ (include address and description) Passes McKinley School Public Service/Morale 20 350 Loma Alta Dr SB 93109 Public Service/Morale Notre Dame 12 33 E Micheltorena St SB 93101

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 4/19/18

Comment: __

4. Verification



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	pients		
• Use Se	ection A to identify the agency's department or unit	t. • Use Section B to	identify an individual. • Use Section C to identify an outside organization.
Α.	Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
В.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:
			Ceremonial Role Other Income Income
			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
	oe Elementary Flora Vista Dr	12	Public Service/ Morale
St Ra 160 S	aphael School St Josephs St SB 93111	12	Public Service/ Morale
160 S	St Josephs St SB 93111	12	