

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

Agency Name

Arts & Lectures

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 Music Dept	2	Faculty
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
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

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Ceremonial Role Events and Ticket/Pass Distributions**

A Public Document

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
Arts & Lectures			
Division, Department, or Region (if applicable)		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _____ <small>(month, day, year)</small>	
University of California			
Designated Agency Contact (Name, Title)			
Area Code/Phone Number	E-mail		
805-893-3458	Rachel Leslie, Mgr. of Ticketing Operations 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

Event Description: DorranceDance, performance Date(s) 3 / 8 / 17
Provide Title/Explanation

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: Baratiak, Roman
Name of Source
Official's Name (Last, First)

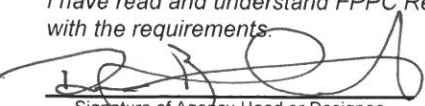
3. Recipients

• 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 Theater/Dance	7	Public Service / Faculty
B. Name of Individual (Last, First)		
	Number of Ticket(s)/ Passes	Identify one of the following: Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (include address and description)		
Cal Poly San Luis Obispo San Luis Obispo, CA 93407	2	Public Service
Hollywood Bowl, 2301 Highland Ave, Los Angeles, CA 90068	3	Public Service

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 **Roman Baratiak, Associate Director** Title

(month, day, year) **3/13/17**

Comment: _____

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

A Public Document

1. Agency Name Arts & Lectures		Date Stamp	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) University of California			
Designated Agency Contact (Name, Title) <u>Rachel Leslie, Mgr. of Ticketing Operations</u>		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _____ (month, day, year)	
Area Code/Phone Number <u>805-893-3458</u>	E-mail <u>rachel.leslie@artsandlectures.ucsb.edu</u>		

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 50

Event Description: Gloria Steinem, lecture Date(s) 3 / 2 / 17
Provide Title/ Explanation

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: Baratiak, Roman
Name of Source
Official's Name (Last, First)

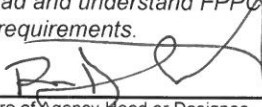
3. Recipients

• 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 History	1	Public Service / Faculty
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
Democratic Women of SBC PO Box 90655, Santa Barbara, CA 93190	2	Public Service
Girls Inc of Santa Barbara PO Box 236, Santa Barbara, CA 93102	12	Public Service

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

Roman Baratiak, Associate Director

 Title

3/7/17

 (month, day, year)

Comment: _____

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

A Public Document

1. Agency Name Arts & Lectures Division, Department, or Region (if applicable) University of California Designated Agency Contact (Name, Title) Rachel Leslie, Mgr. of Ticketing Operations Area Code/Phone Number E-mail 805-893-3458 rachel.leslie@artsandlectures.ucsb.edu	Date Stamp	California Form 802 For Official Use Only
<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.)		Date of Original Filing: _____ (month, day, year)

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 16

Event Description: Hansel & Gretel Date(s) 3 / 14 / 17
Provide Title/Explanation

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: Baratiak, Roman
Name of Source / Official's Name (Last, First)

3. Recipients
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		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
Adams Elementary School 2701 Las Positas Rd SB CA 92105	40	Public Service/Morale
Alpha Resource Center 4501 Cathedral Oaks Rd SB CA 93110	15	Public Service/Morale

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
3/17/17

Signature of Agency Head or Designee
Print Name
Title
/(month, day, year)

Comment: _____

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Arts & Lectures

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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
Cathedral Oaks Pre-School 4974 Cathedral Oaks Rd Goleta, CA 93117	4	Public Service/Morale
Girls Inc of SB PO Box 236 SB CA 93102	30	Public Service/Morale
La Colina JR High School 4025 Foothill Rd SB CA 93110	4	Public Service/Morale
Notre Dame School 33 E Micheltorena St SB CA 93101	14	Public Service/Morale

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B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
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		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
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
St. Raphael School 160 St Josephs St SB CA 93111	30	Public Service/Morale

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1. Agency Name Arts & Lectures Division, Department, or Region (if applicable) University of California Designated Agency Contact (Name, Title) Rachel Leslie, Mgr. of Ticketing Operations Area Code/Phone Number 805-893-3458 E-mail rachel.leslie@artsandlectures.ucsb.edu	Date Stamp <input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _____ (month, day, year)	California Form 802 For Official Use Only
		(blank space for official use)

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 32

Event Description: Igot Levit, Piano Date(s) 3 / 10 / 17
Provide Title/Explanation

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: Baratiak Roman
Name of Source / Official's Name (Last, First)

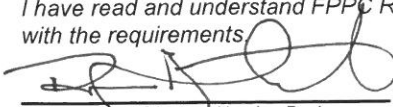
3. Recipients

• 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 Music Dept.	2	Faculty
UCSB Music Dept.	6	Public Service/Morale
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
Casa Dorinda Retirement Residence 300 Hot Springs Rd SB, CA 93108	14	Public Service/Morale
Music Teachers Association 1141 N Patterson Ave SB, CA 93111	12	Public Service/Morale

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

3/13/17
 (month, day, year)

Comment: _____

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1. Agency Name Arts & Lectures		Date Stamp	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) University of California			
Designated Agency Contact (Name, Title) <i>Rachel Leslie, Mgr. of Ticketing Operations</i>			
Area Code/Phone Number <i>805-893-3458</i>	E-mail <i>rachel.leslie@artsandlectures.ucsb.edu</i>	<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.)	
		Date of Original Filing: _____ (month, day, year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 30

Event Description: Noche Flamenca, performance Date(s) 3 / 3 / 17
Provide Title/Explanation

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: Baratiak, Roman
Name of Source
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 / Faculty
	UCSB Department of Theater/Dance	4	Public Service / Faculty
B.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
			Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
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Roman Baratiak
Signature of Agency Head or Designee

Print Name Roman Baratiak, Associate Director Title

3/7/17
(month, day, year)

Comment: _____