Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name California Date Stamp Arts & Lectures Form 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 (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: Manuel Cinema Date(s) __3__/_4 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 A. 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 Faculty 2 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 of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy (include address and description) Passes **Audacious Foundation** Public Service/Morale 200 PO Box 91340 Santa Barbara CA 93190 4. Verification I have read and understand FPP 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

Comment:

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California Arts & Lectures Division, Department, or Region (if applicable) For Official Use Only University of California Designated Agency Contact (Name, Title) Rachel Ledie, 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 \$ 20 Does the agency have a ticket policy? Yes⊠ No□ Event Description: Robert Sapolsky/ Lecture Date(s) 3 / 13 / 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 A. Name of Agency, Department or Unit Describe the public purpose made pursuant to the agency's policy of Ticket(s) **Passes KCSB** Public Service/Morale 2 UCSB Psychological & Brain Sciences Dept. Faculty 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 C. 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 FPP Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements

Agency Report of: A Public Document Ceremonial Role Events and Ticket/Pass Distributions Date Stamp California 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 Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: -(month, day, year) 805-893-3468 rachel leslie@arts and lectures. ucsb.edu 2. Function or Event Information Face Value of Each Ticket/Pass \$ 38 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Squirrel Nut Zippers Date(s) __3__/_ Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No □ If no: _ Name of Source 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 Public Service/Morale **KCSB** 2 Faculty **UCSB Music Dept** 1 Number Name of Individual Identify one of the following: B. of Ticket(s)/ (Last, First) **Passes** Other Income Ceremonial Role If checking "Ceremonial Role" or "Other" describe below: Other Income 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)/ C. (include address and description) Passes

4. Verification

I have read and understand FPPC F	Regulations 18944.1 and 18942. I have verified that the distribution set for	th above, is in accordance
with the requirements	Aciate Director	1 1 2
DATE OF	Roman Baratiak, Associate Director	3/7/18

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

Comment: _

C	Ceremonial Role Events and Ticket/	Pass Disti	ributions	Δ	Public Document
1.	Agency Name			Date Stamp	Colifornia
	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	Manager		Amendment (Must b	Provide Explanation in Part 3.)
	Area Code/Phone Number E-mail	-		Amendment (wastr	TOVIDE Explanation in Part 3.)
··	805-893-3458 rachel.leslie@arts	sand lectures	.ucsb.edu	Date of Original Filing:	(month, day, year)
2.	Function or Event Information	A	The state of the s		
	Does the agency have a ticket policy? Yes	⊠ No□ □	Face Value of	Each Ticket/Pass \$ 2	5
	Event Description: Wu Man & The Huayin Band	d/ Perf.		<u>/ 8 / 18</u>	
	Ticket(s)/Pass(es) provided by agency? Yes		f no:		
				Name of Source	
	Was ticket distribution made at the behest Yes of agency official?	⊠ No□ I	f 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 individ	ual. • Use Section C to ident	ify an outside organization.
	A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made pur	suant to the agency's policy
	KCSB Radio	2	Public Service	ce/Morale	
	Music Department	5	Faculty		
	B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes		Identify one of the fo	ollowing:
				onial Role Other ing "Ceremonial Role" or "Other" des	
			The second secon	onial Role Other on "Other" des	Income Cribe below:
	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
	-				
	Verification I have read and understand FPPC Regulations 18944	1.1 and 18942	have verified th	nat the distribution set to	rth ahove is in accordance
_	with the requirements.		atiak, Associate		3/18/18
	Signature of Agency Head or Designee Pr	rint Name		Title	(month, play, year)

Comment:

Agency Report of:

Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California Arts & Lectures **Form** 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.ucsla.edu (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 69 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Buddy Buddy/ Performance Date(s) 3 / 16 / 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 KCSB Radio Public Service/Morale 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: Other Income 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 C. of Ticket(s)/ (include address and description) Passes Public Service/Morale Dos Pueblos Little League 4 Public Service/Morale The Granada Theater 3 1330 State St Ste 101 SB 93101 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./

Agency Report of:

Comment:

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California 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: rachel.leslie@artsandlectures.ucsb.edu 805-893-3458 (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: Carmen/Performance 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 Theater and Dance Faculty 5 KCSB Radio Public Service/Morale 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** Congregation B'nai B'rith Public Service/Morale 2 900 San Antonio Creek Rd SB 93111 Cox Communication Public Service/Morale 2 22 S. Fairview Avenue Goleta 93117

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

4. Verification

Signature of Agency Head or Designee

Rough Roug

Comment:

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



gency Name					
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 organi					
A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy			
Music Dept	2	Public Service/Morale			
SIST 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 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:			
		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			
Anti-Defamation League 1528 Chapala St Ste 301 SB 93101	4	Public Service/Morale			
Deckers Outdoor Corporations 250 Coromar Drive Goleta 93117	50	Public Service/Morale			
Santa Barbara High School 700 E Anapamu St SB 93101	15	Public Service/Morale			
Santa Barbara Mission Archive-Library 2201 Laguna St SB 93105	2	Public Service/Morale			

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California 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 Does the agency have a ticket policy? Face Value of Each Ticket/Pass \$ 69 Yes ⊠ No □ Event Description: Carmen/Performance 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? 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. 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 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 of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy (include address and description) **Passes** Youth Interactive Public Service/Morale 13 209 Anacapa St SB 93101 4. Verification

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

with the requirements.

Roman Bard, & Associate Director 4/19

Signature of Agency Head or Designee Print Name

Comment: _____