Ceremonial Role Events and Ticket/Pass Distributions			A Public Documen				
1. Agency	y Name			Date Stamp	California 802		
Arts & L					Form OUZ		
Division	, Department, or Region (if applicable)			1	For Official Use Only		
Univers	ity of California						
Designa	ted Agency Contact (Name, Title)	1					
Area Coo	1 Jeslie, Mar. of Ticketing de/Phone Number E-mail rachel leslie		ions	Amendment (Must Pr	ovide Explanation in Part 3.)		
805-89	13-3456	KSh.ed U		Date of Original Filing: _	(month, day, year)		
2. Function	on or Event Information		Contraction of the statement		A CONTRACTOR OF		
Does the	e agency have a ticket policy? Ye	s⊠ No⊡ F	ace Value of	Each Ticket/Pass \$ 40	/20/10		
Event D	escription: Brooklyn Rider & Kayhan K Provide Title/ Exi	alhor [Date(s)				
Ticket(s)	Ticket(s)/Pass(es) provided by agency? Yes ⊠ No □ If no:						
of ager	et distribution made at the behest Yes	s⊠ No□	f yes:Bai	Official's Name (Last, First)	1		
3. Recip • Use Sec	ients tion A to identify the agency's department or unit.	• Use Section B to	identify an individ	ual. • Use Section C to identi	fy an outside organization.		
Α.	Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the	e public purpose made purs	uant to the agency's policy		
UCSB	Black Studies Dept	2	Faculty				
UCSB	Music Dept	4	Faculty				
В.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes		Identify one of the fol	llowing:		
			The second se	onial Role Other Other ing "Ceremonial Role" or "Other" desc	Income		

			Ceremonial Role Other Income Income
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
Montessori Center School 401 N Fairview Ave Ste 1 Goleta CA 93117		2	Public Service/Morale

4. Verification

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

Kal	Roman Baratiak	, Associate Director	5/2/17
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

Comment:



Agency Name

Arts & Lectures

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 Physics Dept	2	Public Service/Morale
UCSB Religious Studies Dept	1	Faculty
UCSB Student Health Dept	2	Public Service/Morale
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role Other I Income I If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role Cother Income Income Income
		Ceremonial Role Other Income Income Income
		Ceremonial Role Other Income Income
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

Ce	eremonial Role Events and Ticket/P	ass Disti	ributions	Α	Public Document
1.	Agency Name			Date Stamp	
	Arts & Lectures				Form 802
Ĩ	Division, Department, or Region (if applicable)				For Official Use Only
	University of California				
	Designated Agency Contact (Name, Title)				
	LESIIC, Rachel, Manager of Tic	keting o	Perations	Amendment (Must Pro	ovide Explanation in Part 3.)
1	Area Code/Phone Number E-mail K5 242 21154 [ache]. leslie	artsandb	(t)les		ovide Explanation in Fait 3.)
- V	0-895-0908	UCSD. C	du	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 \$	
	Event Description: Lynsey Addario, lecture Provide Title/ Explai	I	Date(s)/	13 / 17	
			lf no:		
			If yes: Bara	Name of Oc	
	Was ticket distribution made at the behest Yes	No 🗌 🕺	If yes: Dulu	Official's Name (Last, First)	
	of agency official?				
3.	Recipients				
	• Use Section A to identify the agency's department or unit.	Use Section B to	identify an individ	ual. • Use Section C to identif	fy an outside organization.
	A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes		e public purpose made purs	
	UCSB Associated Students	2	Public Servic	e / Staff	
	UCSB Biomolecular Science and Engineering	2	Public Servic	e / Staff	
	B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes		Identify one of the fol	llowing:
				onial Role Other Other of "Other" descri	nibe below:
0				nial Role Dother Dother Dother Ceremonial Role" or "Other" descri	Income
	C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the	public purpose made pursu	ant to the agency's policy
	Art Without Limits 816 Chelham Way, Santa Barbara, CA 93108	2	Public Servic	e	

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

11 (month, day, year)

Comment:

Title



Agency Name

Arts & Lectures

3. Recipients

Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
2	Public Service / Staff
4	Public Service / Staff
2	Public Service / Staff
2	Public Service / Staff
Number of Ticket(s)/ Passes	Identify one of the following:
	Ceremonial Role Other Income Income
	Ceremonial Role Other I Income
	Ceremonial Role Other Income Income
	Ceremonial Role Other Income Income
Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
	of Ticket(s)/ Passes 2 4 2 2 Number of Ticket(s)/ Passes

C	eremonial Role Events and Ticket/F	Pass Distr	ributions	A	Public Document	
1.	Agency Name		Second Second Second	Date Stamp	California 000	
	Arts & Lectures				Form 802	
	Division, Department, or Region (if applicable)			1	For Official Use Only	
	University of California				8	
	Designated Agency Contact (Name, Title)			1		
	Rachel Leslie, Manager of Ticke	ting on	clations		rovide Explanation in Part 3.)	
	Area Code/Phone Number IE-mail				ovide Explanation III Part 5.)	
8	05-89.3-34.58 rachel.leslie@		i.cdu	Date of Original Filing: _	(month, day, year)	
2.	Function or Event Information			0.5		
	Does the agency have a ticket policy? Yes	🛛 No 🗌	Face Value of	Each Ticket/Pass \$ $\frac{25}{2}$		
	Event Description: Lynsey Addario, lecture Provide Title/ Expla	nation	Date(s) <u>5</u>	<u>, 13 , 17</u>	//	
			lf no:			
			min	Name of Bource		
	Was ticket distribution made at the behest Yes	⊠ No□	r yes: <u>Pull</u>	Official's Name (Last, First)		
	of agency official?					
3.	Recipients		a that the second se			
	• Use Section A to identify the agency's department or unit.	Use Section B to	identify an individ	ual. • Use Section C to identi	fy an outside organization.	
	A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe th	Describe the public purpose made pursuant to the agency's pol		
	UCSB Chemical Engineering Department	6	Public Servio	ce / Staff		
	UCSB College of Letters & Science	4	Public Servic	ce / Staff		
		Number				
	B. Name of Individual (Last, First)	of Ticket(s)/ Passes		Identify one of the fo	llowing:	
				onial Role Other Other ing "Ceremonial Role" or "Other" desc	Income	
				onial Role Other ing "Ceremonial Role" or "Other" desc	Income	
	C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the	e public purpose made purs	uant 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.

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



Agency Name

Arts & Lectures

3. Recipients

Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
2	Public Service / Staff
2	Public Service / Staff
2	Public Service / Staff
6	Public Service / Staff
Number of Ticket(s)/ Passes	Identify one of the following:
	Ceremonial Role Other Income Income
Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
	of Ticket(s)/ Passes 2 2 2 6 Number of Ticket(s)/ Passes

C	eremonial Role Events and Ticket/P	ass Distr	ributions	1	A Public Document		
1.	Agency Name			Date Stamp	California 802		
	Arts & Lectures				1 0,111		
	Division, Department, or Region (if applicable)			1	For Official Use Only		
	University of California						
	Designated Agency Contact (Name, Title)	e Mari Para		1			
	Rachel Leslie, Manager of Tickel	tina oper	ration s		t Provide Explanation in Part 3.)		
	865-843-3458 Gachel. leslie	ush-pdu	COUPS.	Date of Original Filing	(month, day, year)		
2.	Function or Event Information						
	Does the agency have a ticket policy? Yes [No 🗆 🖡	ace Value of	Each Ticket/Pass \$	25		
	Event Description: Lynsey Addario, lecture	[Date(s) <u>5</u>	<u>, 13 , 17</u>	//		
	Provide Title/ Explain						
	Ticket(s)/Pass(es) provided by agency? Yes	X No 🗌 I	f no:	Name of Source			
	Was ticket distribution made at the behest Yes	Was ticket distribution made at the behest Yes 🛛 No 🗌 If yes: Barat No Key Mana distribution made at the behest Yes 🖾 No 🗌					
	of agency official?			Official's Name (Last, First	9		
3.	Recipients						
	• Use Section A to identify the agency's department or unit.		identify an individ	ual. • Use Section C to ide	ntify an outside organization.		
	A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made pu	ursuant to the agency's policy		
	UCSB Electrical & Computer Engineering	2	Public Servic	ce / Staff			
	UCSB Engineering Computing Infrastructure	2	Public Servio	ce / Staff			
	B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes		Identify one of the	following:		
				onial Role Other Other			
				onial Role Dother [
	C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the	e public purpose made pu	ursuant to the agency's policy		
			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	Print Name	Title	(month, day, year)



Agency Name

Arts & Lectures

3. Recipients

Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy		
2	Public Service / Staff		
2	Public Service / Staff		
2	Public Service / Staff		
2	Public Service / Staff		
Number of Ticket(s)/ Passes	Identify one of the following:		
	Ceremonial Role Other Income Income		
	Ceremonial Role Other Income Income		
	Ceremonial Role Other I Income		
	Ceremonial Role Other Income Income		
Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy		
	of Ticket(s)/ Passes 2 2 2 2 Number of Ticket(s)/ Passes		

Ceremonial Role Events and Ticket/Pass Distributions			Δ	Public Document	
1.	Agency Name		a la constante de la constante	Date Stamp	California 802
	Arts & Lectures				Form OUZ
	Division, Department, or Region (if applicable)			1	For Official Use Only
	University of California				
	Designated Agency Contact (Name, Title)			1	
	Kachel Laslie, Managel of Tick Area Code/Phone Number E-shail	eting of	elations	Amendment (Must)	Provide Explanation in Part 3.)
8	105-893-3458 racher. leslie	gitsand 1	ectures.	Date of Original Filing:	(month, day, year)
2.	Function or Event Information	usur u			n - An Arthur - Andrew Andr
	Does the agency have a ticket policy? Yes	No 🗆 🖡	Face Value of	Each Ticket/Pass \$ <u>2</u>	5
	Event Description: Lynsey Addario, lecture Provide Title/ Expla	[Date(s) <u>5</u>	<u>, 13 , 17</u>	//
			f no:	Name of Course	
	Was ticket distribution made at the behest Yes of agency official?	No 🗆 🛛	f yes:B	Name of Source	IN
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 iden	tify an outside organization.
	A. Name of Agency, Department or Unit	of Ticket(s)/ Passes	Describe the	e public purpose made pu	rsuant to the agency's policy
	UCSB Geography Department	3	Public Servic	ce / Staff & Faculty	
	UCSB Graduate School of Education	2	Public Servic	ce / Staff	
	B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes		Identify one of the f	following:
				onial Role Other Cing "Ceremonial Role" or "Other" de	
				onial Role Dother ing "Ceremonial Role" or "Other" de	
	C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the	e public purpose made pur	suant 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.

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

Comment: ___



Agency Name

Arts & Lectures

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 Housing & Residential Services	2	Public Service / Staff
UCSB Information Systems & Computing Department	2	Public Service / Staff
UCSB Materials Department	4	Public Service / Staff
UCSB Mechanical Engineering Department	2	Public Service / Staff
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role Other I Income If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role Other Income Income
		Ceremonial Role Other Income Income
		Ceremonial Role Cother Cother Income
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

Ceremonial Role Events and Ticket	/Pass Disti	ributions	Α	Public Document
1. Agency Name			Date Stamp	California 802
Arts & Lectures				Form OUZ
Division, Department, or Region (if applicable)			1	For Official Use Only
University of California				
Designated Agency Contact (Name, Title)			1	
Rachel Leslie			Amondmont (14)	
Area Code/Phone Number E-mail	Autorall	OCLUS R		rovide Explanation in Part 3.)
Area Code/Phone Number 805-893-3458 UCSD	2 ansana 1		Date of Original Filing: .	(month, day, year)
2. Function or Event Information				-
Does the agency have a ticket policy? Ye	es 🛛 No 🗆	Face Value of	Each Ticket/Pass \$ 25)
Event Description: Lynsey Addario, lecture Provide Title/ Ex	planation	Date(s) <u>5</u>	<u>, 13 , 17</u>	//
Ticket(s)/Pass(es) provided by agency? Ye	s 🛛 No 🗆	If no:		
Was ticket distribution made at the behast of	_	IFVOS: BAVI	Name of Source	
Was ticket distribution made at the behest Ye of agency official?	s 🖄 No 🗌	ir yesu	Official's Name (Last, First)	0
of agency official?				
3. Recipients • Use Section A to identify the agency's department or unit.	• Use Section B to	identify an individ	lual. • Use Section C to ident	ify an outside organization.
A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made purs	suant to the agency's policy
UCSB Neuroscience Research Institute	2	Public Servi	ce / Staff	
UCSB Political Science Department	2	Public Servi	ce / Staff	
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes		Identify one of the fo	bllowing:
			nonial Role Other Other king "Ceremonial Role" or "Other" des	
		Cerem If check	nonial Role Other Marking "Ceremonial Role" or "Other" des	Income
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe th	e public purpose made purs	uant 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.

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

Comment: _



Agency Name

Arts & Lectures

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 Statistic & Applied Mathematics Department	2	Public Service / Faculty
UCSB Student Health Department	4	Public Service / Staff
UCSB Student Information Systems & Technology	6	Public Service / Staff
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 I Income Income If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role Other Income Income
		Ceremonial Role Dther 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:

C	eremonial Role Events and Ticket/	Pass Dist	ributions	A	Public Docum	ent
1.	Agency Name			Date Stamp	California	2
	Arts & Lectures				Form 80	
	Division, Department, or Region (if applicable)			1	For Official Use Only	l
	University of California					
	Designated Agency Contact (Name, Title)					
	Rachel Loslie, Mar-of Ticketine	a Doerati	ons	Amendment (Must Pro		
					ovide Explanation in Part 3.)	
8	15-893-3458 rachel lestie	Usb. cd	f(C U(x))	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 \$ _54	, \$39	
	Event Description: Old Crow Med Show/ Perfor		Date(s)			
	Provide Title/ Expla		Date(s)		//	
	Ticket(s)/Pass(es) provided by agency? Yes	No 🗆	f no:			
	Was ticket distribution made at the behest Yes of agency official?	No 🗆 🛛	f yes:BO	Name of Source]	-
	or agency official?					
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 identif	ir an autoida arraniantian	
	A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes		e public purpose made purs		
	UCSB Music Dept	2	Faculty			
	B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes		Identify one of the fol	lowing:	
		F 45555		onial Role D Other n other n other or "Other" descri	ncom	e [
				onial Role Other Other Ing "Ceremonial Role" or "Other" descri	ibe below:	e 🗌
	C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the	public purpose made pursu	ant to the agency's polic	у
	Dos Pueblos High School		Public Servic	e/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, P

4

Signature of Agency Head or Designee

7266 Alameda Ave Goleta CA 93117

PROVINE Baratiak, Associate Director

(month,

Comment: _

Title

-	eremonial Role Events and Ticket	Pass Distr	indutions	AI	Jublic Document
1.	Agency Name			Date Stamp	California
	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, Mar. of Ticketing Perations Area Code/Phone Number E-mail rachel. Icslie@aytsond lectures.			Amendment (Must Pro	vide Explanation in Part 3.)
4	205-893-3458 USD-CO			Date of Original Filing:	(month, day, year)
2.	Function or Event Information				
	Does the agency have a ticket policy? Yes	s⊠ No⊡ I	ace Value of	Each Ticket/Pass \$ <u>⁸³</u>	
	Event Description: YoYo-Ma, Meyer, Thile/ Per	rformance	Date(s) <u>5</u>	<u>, 2 , 17</u> _	//
	Ticket(s)/Pass(es) provided by agency? Yes		f no:		
3.				Name of Source	
	• Use Section A to identify the agency's department or unit.	• Use Section B to	identify an individ	ual. • Use Section C to identify	an outside organization.
	A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made pursu	ant to the agency's policy
	UCSB Vice Chancellor's Office	2	UC Official		
	UCSB Chancellor's Office	2	Admin		
	B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes		Identify one of the foll	owing:
				onial Role Other Other ing "Ceremonial Role" or "Other" descri	Income

			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

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 nonth. Comment: