Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions 1. Agency Name

A Public Document

١.	Agency Name				Date Stamp	Califo mia 802	
	California Department of Just					Form OUZ	
	Division, Department, or Region (if applicable)					For Official Use Only	
					2		
	Designated Agency Contact (Name, Title)						
	Victoria Sawyer, Special Assistant to the Chie Deputy				Amendment (Must Provide Explanation in Part 3.)		
	Area Code/Phone Number	E-mail					
	(916) 709-2 319	Victoria.Sawy	er@doj.ca.gov		Date of Original Filing:	(month, day, year)	
2.	Function or Event Inform	mation					
	Does the agency have a tick	cet policy?	Yes No No	Face Value of I	Each Ticket/Pass \$	125.00	
	Eve Mescription: Sporting	Event		Date(s) 7	, 28 , 21		
	Provide Title/ Explanation						
	Ticket(s)/Pass(es) provide by agency? Yes ☐ No ☐ If no: FAA			f no: FAAE P	Name of Source	estivai	
	Was ticket distribution made	at the hehest	Va □ Na ■	f ves:			
	of agency official?	at the benest	Ye isi No	1 700.	Official's Name (Last, First)		
	or agency emolar:						
3.	Recipients						
	Use Section A to identify the agen-	cy's department or	unit. • Use Section B to	identify an individu	tal. tJse Section C to identif	y an outside organization.	
	A. Name of Agency, Depa	rtment or Unit	Number of Ticket(s)/	Describe the	e public purpose made pur	suant to the agency's policy	
			Passes				
	at						
	-		Number				
	B. Name of Indiv		of Ticket(s)/		Identify one of the f	ollowing:	
	(Last, 1113	×/	Passes	Cover	onial Role Other	Income	
	Bonta, Rob		1	If checking "Ceremonial Role" or "Other" describe below:			
				SF Giants C	Ceremony Game for F	ilipino Heritage Night	
				Cerem	nonial Role Other	Income	
					ring "Ceremonial Role" or "Other" de		
					· E		
	Name of Outside On	rgan Ization	Number	Describe the	e nublic nurnose made nur	suant to the agency's policy	
	(include address and		of Ticket(s)/ Passes	Describe as	passia parpose made par	odune to the agency o poncy	
				Face Value of Each Ticket/Pa Date(s)			
					<u>.</u>		
l.	Verification						
		PC Regulations	18944.1 and 18942.	I have verified t	hat the distribution set fo	orth above, is in accordance	
	with the requirements.			***		03/16/22	
	7/100/100/100/						
	Signature of Agency Head or Design	eē	Print Name		Hige	(month, day, year)	
	Comment:						

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



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.								
Α.	Name of Agency, Department or Unit	Number of Ticket(s)/	Describe the public purpose made pursuant to the agency's policy					
		Passes						
ů			10					
B. Name of Individual (Last, First)		Number of Ticket(s)/ Passes	Identify one of the following:					
Ú.			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 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 Ticke\(s)/ Passes	Describe the public purpose made pursuant to the agency's policy					
/								

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