

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

A Public Document

1. Agency Name Placer County Office of Education (PCOE)		Date Stamp	California Form 802 For Official Use Only
Division, Department, or Region (if applicable)		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: <u>4/1/17</u> <small>(month, day, year)</small>	
Designated Agency Contact (Name, Title) Gayle Garbolino-Mojica, Superintendent			
Area Code/Phone Number 530-889-5922	E-mail ggarbolino@placercoe.k12.ca.us		

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 200.00

Event Description: Ariana Grande Tickets/ parking pass Date(s) 3 / 26 / 17
Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: Sutter Medical Foundation
Name of Source

Was ticket distribution made at the behest of agency official? Yes No If yes: Gayle Garbolino-Mojica
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
PCOE Student Services Department	13	promoting staff morale per SP 9270
PCOE -SELPA Department	3	promoting staff morale per SP 9270
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

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.

Gayle Garbolino-Mojica
SUPERINTENDENT
4/1/17
(month, day, year)

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

Comment: _____

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

Agency Name

Placer County Office of Education (PCOE)

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
PCOE - IT Department	2	promoting staff morale per SP 9270
PCOE - Business Department	3	promoting staff morale per SP 9270
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>
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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