

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

A Public Document

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|---|--------------------------|--|---|
| 1. Agency Name | | Date Stamp | California Form 802 For Official Use Only |
| Solano County Transit (SolTrans) | | SolTrans | |
| Division, Department, or Region (if applicable) | | JAN 30 2018 | |
| SolTrans Board & Employees | | | |
| Designated Agency Contact (Name, Title) | | <input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) | |
| Suzanne Fredriksen, Board Clerk | | Date of Original Filing: _____ (month, day, year) | |
| Area Code/Phone Number | E-mail | | |
| (707) 736-6993 | suzanne@soltransride.com | | |

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 70

Event Description: Benicia Chamber Installation Dinner Date(s) 01 / 26 / 18
Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: Benicia Chamber of Commerce
Name of Source

Was ticket distribution made at the behest of agency official? Yes No If 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 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 |
|---|-----------------------------|---|
| SolTrans Executive Director | 1 | To attend an event sponsored by SolTrans |
| B. Name of Individual (Last, First) | | |
| Dew-Costa, Pippin | 1 | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: To attend an event sponsored by SolTrans |
| Sampayan, Bob | 2 | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: To attend an event sponsored by SolTrans |
| C. Name of Outside Organization (include address and description) | | |
| Congressional District 5, 420 Virginia Street, Suite 1-C, Vallejo, CA 94590 | 1 | To attend an event sponsored by SolTrans |
| BB&B Business Group, 207 Wallace Ave, Vallejo, CA 94590 | 1 | To attend an event sponsored by SolTrans |

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.

 _____ Suzanne Fredriksen _____ Board Clerk _____ 01/30/18
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: _____