

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

A Public Document

1. Agency Name

County of Tulare
Division, Department, or Region (if applicable)

Designated Agency Contact (Name, Title)

Jason T. Britt, County Administrative Officer

Area Code/Phone Number

559-636-5005

E-mail

jtbritt@tularecounty.ca.gov

Date Stamp
RECEIVED

MAY 10 2022

TULARE COUNTY
BOARD OF SUPERVISORS

California
Form **802**

For Official Use Only

☐ Amendment (Must Provide Explanation in Part 3.)

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 \$ 100.00

Event Description: Cattlewomen Spurs & Spikes Date(s) 4 / 01 / 22
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: _____
Name of Source

Was ticket distribution made at the behest of agency official? Yes ☒ No ☐ If yes: Britt, Jason T.
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
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Townsend, Dennis	2	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Promoting services and programs available to the public.
Hess, John	1	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Promoting services and programs available to the public.
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

Jason T. Britt

Print Name

County Administrative Officer

Title

5/5/22
(month, day, year)

Comment:

Print

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

Agency Name

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
B.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
			Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
			Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
			Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
			Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
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

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County of Tulare			
Division, Department, or Region (if applicable)			
Designated Agency Contact (Name, Title)			
Jason T. Britt, County Administrative Officer			
Area Code/Phone Number	E-mail		
559-636-5005	jtbritt@tularecounty.ca.gov		

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass \$ 100.00

Event Description: 2022 Birdhouse Auction Date(s) 4 / 01 / 22
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: _____
Name of Source

Was ticket distribution made at the behest of agency official? Yes ☒ No ☐ If yes: Britt, Jason T.
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
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Shuklian, Amy	2	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Promoting services and programs available to the public ☒
Micari, Larry	2	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Promoting services and programs available to the public ☒
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:  Jason T. Britt County Administrative Officer 5/5/22
Print Name Title (month, day, year)

Comment: _____

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

Agency Name

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

B.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
			Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
	Dennis Townsend	2	Promoting services and programs available to the public ☒ Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
			Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
			Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>

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

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County of Tulare Division, Department, or Region (if applicable)			For Official Use Only
Designated Agency Contact (Name, Title)		☐ Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _____ (month, day, year)	
Jason T. Britt, County Administrative Officer Area Code/Phone Number E-mail			
559-636-5005	jtbritt@tularecounty.ca.gov		

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass \$ 100.00

Event Description: Salt & Light Golf Tournament Date(s) 4 / 22 / 22 / /
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: _____
Name of Source

Was ticket distribution made at the behest of agency official? Yes ☒ No ☐ If yes: Britt, Jason T.
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
B.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Townsend, Dennis	2	Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i> Promoting services and programs available to the public	
Vander Poel, Pete	2	Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i> Promoting services and programs available to the public	
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.

	Jason T. Britt	County Administrative Officer	5/5/22
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

Comment:

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Agency Report of:
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Continuation Sheet

Agency Name

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

B.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
			Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
			Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
			Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
			Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>

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

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Division, Department, or Region (if applicable)			
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Jason T. Britt, County Administrative Officer		☐ Amendment (Must Provide Explanation in Part 3.)	
Area Code/Phone Number	E-mail	Date of Original Filing: _____ (month, day, year)	
559-636-5005	jtbritt@tularecounty.ca.gov		

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass \$ 75.00

Event Description: Tree to Table Farmer Bob's World Date(s) 04 / 22 / 22
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: _____
Name of Source

Was ticket distribution made at the behest of agency official? Yes ☒ No ☐ If yes: Britt, Jason T.
Official's Name (Last, First)

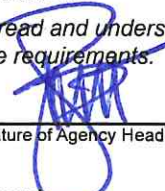
3. Recipients

• 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
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Shuklian, Amy	2	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Promoting services and programs available to the public ☒
Micari, Larry	2	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Promoting services and programs available to the public ☒
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 Jason T. Britt County Administrative Officer 05/05/22
Print Name Title (month, day, year)

Comment: _____

Print

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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

B.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
			Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
	Britt, Jason	1	Promoting services and programs available to the public 
	Valero, Eddie	1	Promoting services and programs available to the public 
			Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
			Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>

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

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Division, Department, or Region (if applicable)

Designated Agency Contact (Name, Title)

Jason T. Britt, County Administrative Officer

Area Code/Phone Number

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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 \$ 100.00

Event Description: Sierra View Golf Classic Date(s) 4 / 29 / 22

Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: _____

Name of Source

Was ticket distribution made at the behest of agency official? Yes ☒ No ☐ If yes: Britt, Jason T.
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
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Townsend, Dennis	2	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Promoting services and programs available to the public ☒
Hess, John	1	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Promoting services and programs available to the public ☒
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: _____ Jason T. Britt _____ County Administrative Officer _____ 5/5/22 _____
Print Name Title (month, day, year)

Comment: _____

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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
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
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

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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 \$ 65.00

Event Description: Tulare County Farm Bureau Annual M Date(s) 05 / 04 / 22
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: _____
Name of Source

Was ticket distribution made at the behest of agency official? Yes ☒ No ☐ If yes: Britt, Jason T.
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
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Shuklian, Amy	2	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Promoting services and programs available to the public ☒
Micari, Larry	2	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Promoting services and programs available to the public ☒
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

Jason T. Britt

Print Name

County Administrative Officer

Title

05/05/22

(month, day, year)

Comment:

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

Agency Name

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
B.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
			Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
	Britt, Jason	1	Promoting services and programs available to the public ☒
	Valero, Eddie	1	Promoting services and programs available to the public ☒
	Townsend, Dennis	2	Promoting services and programs available to the public ☒
			Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
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

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2. Function or Event Information

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
B.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Shuklian, Amy	1	Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i> Promoting services and programs available to the public 	
Micari, Larry	1	Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i> Promoting services and programs available to the public 	
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

Comment:

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Agency Report of:
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A.	Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

B.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
			Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
	Vander Poel, Pete	1	Promoting services and programs available to the public
	Valero, Eddie	1	Promoting services and programs available to the public
	Britt, Jason	1	Promoting services and programs available to the public
	Hess, John	1	Promoting services and programs available to the public

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

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2. Function or Event Information

Was ticket distribution made at the behest of agency official? Yes ☒ No ☐ If yes: Britt, Jason T.
Official's Name (Last, First)

• 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.

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Comment:

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FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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2. Function or Event Information

Was ticket distribution made at the behest of agency official? Yes ☒ No ☐ If yes: Britt, Jason T.
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• 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

B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Hess, John	1	Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i> Promoting services and programs available to the public
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>

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

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2. Function or Event Information

Was ticket distribution made at the behest of agency official? Yes ☒ No ☐ If yes: Britt, Jason T.
Official's Name (Last, First)

- Use Section A to identify the agency's department or unit.
- Use Section B to identify an individual.
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4. Verification

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A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Vander Poel, Pete	1	Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i> Promoting services and programs available to the public
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>

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

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2. Function or Event Information

Does the agency have a ticket policy?	Yes ☒ No ☐	Face Value of Each Ticket/Pass \$	65.00
Event Description:	<u>Tulare Chamber Awards Banquet</u>	Date(s)	<u>1</u> / <u>28</u> / <u>22</u>
	<i>Provide Title/ Explanation</i>		
Ticket(s)/Pass(es) provided by agency?	Yes ☐ No ☒	If no:	
			<i>Name of Source</i>
Was ticket distribution made at the behest of agency official?	Yes ☒ No ☐	If yes:	<u>Britt, Jason T.</u>
			<i>Official's Name (Last, First)</i>

• 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.

Comment: _____

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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

A Public Document

1. Agency Name

County of Tulare
Division, Department, or Region (if applicable)

Designated Agency Contact (Name, Title)

Jason T. Britt, County Administrative Officer

Area Code/Phone Number

559-636-5005

E-mail

jtbritt@tularecounty.ca.gov

Date Stamp
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OCT 19 2021

TULARE COUNTY
BOARD OF SUPERVISORS

☐ Amendment (Must Provide Explanation in Part 3.)

Date of Original Filing: _____
(month, day, year)

California
Form **802**

For Official Use Only

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass \$ 50.00

Event Description: Happy Trails Round Up Fundraiser Date(s) 10 / 08 / 21
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: _____
Name of Source

Was ticket distribution made at the behest of agency official? Yes ☒ No ☐ If yes: Britt, Jason T.
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
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Micari, Larry	2	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Promoting services and programs available to the public.
		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

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: Jason T. Britt County Administrative Officer 10/19/21
Print Name Title (month, day, year)

Comment: _____

Print

Clear

Agency Report of:

Ceremonial Role Events and Ticket/Pass Distributions

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1. Agency Name

County of Tulare

Division, Department, or Region (if applicable)

Designated Agency Contact (Name, Title)

Jason T. Britt, County Administrative Officer

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☐ Amendment (Must Provide Explanation in Part 3.)

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 \$ 50.00

Event Description: Tulare Co. Farm Bureau Mixer

Date(s) 10 / 09 / 21

Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: _____

Name of Source

Was ticket distribution made at the behest of agency official? Yes ☒ No ☐ If yes: Britt, Jason T.
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
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:
	Micari, Larry	2	Promoting services and programs available to the public
	Townsend, Dennis	2	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Promoting services and programs available to the public
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

Jason T. Britt

Print Name

County Administrative Officer

Title

10/19/21

(month, day, year)

Comment: _____

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

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County of Tulare
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Designated Agency Contact (Name, Title)

Jason T. Britt, County Administrative Officer

Area Code/Phone Number

E-mail

559-636-5005

jtbritt@tularecounty.ca.gov

☐ Amendment (Must Provide Explanation in Part 3.)

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 \$ 100.00

Event Description: Tree to Table Celebration Date(s) 10 / 15 / 21

Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: _____
Name of Source

Was ticket distribution made at the behest of agency official? Yes ☒ No ☐ If yes: Britt, Jason T.
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
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Valero, Eddie	1	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Promoting services and programs available to the public
		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

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: Jason T. Britt County Administrative Officer 10/19/21
Print Name Title (month, day, year)

Comment:

Print

Clear

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

Agency Name

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
Board of Supervisors	2	Promoting services and programs available to the public within the county and supporting local charities +

B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>

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

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

A Public Document

1. Agency Name

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**TULARE COUNTY
BOARD OF SUPERVISORS**

California
Form **802**
For Official Use Only

County of Tulare
Division, Department, or Region (if applicable)

Designated Agency Contact (Name, Title)

Jason T. Britt, County Administrative Officer

Area Code/Phone Number

E-mail

559-636-5005

jtbritt@tularecounty.ca.gov

☐ Amendment (Must Provide Explanation in Part 3.)

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 \$ 30.00

Event Description: Tulare Co. Cattlemen's Assoc. Fall Banquet
Provide Title/Explanation Date(s) 10 / 15 / 21

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: _____
Name of Source

Was ticket distribution made at the behest of agency official? Yes ☒ No ☐ If yes: Britt, Jason T.
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
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Micari, Larry	2	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Promoting services and programs available to the public.
		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

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: Jason T. Britt Print Name: County Administrative Officer Title: 10/19/21
(month, day, year)

Comment: _____

Print

Clear

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

A Public Document

1. Agency Name

County of Tulare
Division, Department, or Region (if applicable)

Designated Agency Contact (Name, Title)

Jason T. Britt, County Administrative Officer

Area Code/Phone Number

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jtbritt@tularecounty.ca.gov

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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 \$ 50.00

Event Description: Carry the Light Annual Event Date(s) 10 / 16 / 21

Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: _____
Name of Source

Was ticket distribution made at the behest of agency official? Yes ☒ No ☐ If yes: Britt, Jason T.
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
Health & Human Services Agency	2	Promoting services and programs available to the public within the county and supporting local charities
Board of Supervisors	2	Promoting services and programs available to the public within the county and supporting local charities
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Valero, Eddie	1	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Promoting services and programs available to the public
Micari, Larry	1	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Promoting services and programs available to the public
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: Jason T. Britt County Administrative Officer 10/19/21
Print Name Title (month, day, year)

Comment: _____

Print

Clear

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

A Public Document

1. Agency Name

County of Tulare

Division, Department, or Region (if applicable)

Designated Agency Contact (Name, Title)

Jason T. Britt, County Administrative Officer

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TULARE COUNTY
BOARD OF SUPERVISORS

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☐ Amendment (Must Provide Explanation in Part 3.)

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 \$ 25.00

Event Description: United Way Annual Recognition Breakfast Date(s) 9 / 24 / 21
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: _____
Name of Source

Was ticket distribution made at the behest of agency official? Yes ☒ No ☐ If yes: Britt, Jason T.
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
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Shuklian, Amy	1	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Promoting services and programs available to the public ☒
Micari, Larry	1	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Promoting services and programs available to the public ☒
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

Jason T. Britt

Print Name

County Administrative Officer

Title

10/4/21

(month, day, year)

Comment:

Print

Clear

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

California Form 802
A Public Document

Agency Name

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

B.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
			Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
	Vander Poel, Pete	1	Promoting services and programs available to the public ☒
			Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
	Valero, Eddie	1	Promoting services and programs available to the public ☒
			Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
	Britt, Jason	1	Promoting services and programs available to the public ☒
			Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>

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

Print

Clear

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

A Public Document

1. Agency Name

County of Tulare

Division, Department, or Region (if applicable)

Designated Agency Contact (Name, Title)

Jason T. Britt, County Administrative Officer

Area Code/Phone Number

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BOARD OF SUPERVISORS

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☐ Amendment (Must Provide Explanation in Part 3.)

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 \$ 30.00

Event Description: TCAOR Centennial Celebration Date(s) 09 / 17 / 21

Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: _____

Name of Source

Was ticket distribution made at the behest Yes ☒ No ☐ If yes: Britt, Jason T.

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.

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Shuklian, Amy	2	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Promoting services and programs available to the public ☒
Micari, Larry	2	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Promoting services and programs available to the public ☒
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

Jason T. Britt

Print Name

County Administrative Officer

Title

9/23/21

(month, day, year)

Comment:

Print

Clear

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

California Form 802

A Public Document

Agency Name

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

B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Vander Poel, Pete	1	Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i> Promoting services and programs available to the public
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>

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

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

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1. Agency Name

County of Tulare

Division, Department, or Region (if applicable)

Designated Agency Contact (Name, Title)

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TULARE COUNTY
BOARD OF SUPERVISORS

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For Official Use Only

☐ Amendment (Must Provide Explanation in Part 3.)

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 \$ 150.00

Event Description: CASA Once Upon a Dream Gala

Provide Title/ Explanation

Date(s) 09 / 10 / 21

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒

If no: _____

Name of Source

Was ticket distribution made at the behest of agency official? Yes ☒ No ☐

If yes: Britt, Jason T.

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
County Administrative Office Staff	1	Promoting services and programs available to the public within the county and supporting local charities
Board of Supervisors Staff	1	Promoting services and programs available to the public within the county and supporting local charities
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Valero, Eddie	1	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Promoting services and programs available to the public
		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

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: Jason T. Britt
Print Name: Jason T. Britt
Title: County Administrative Officer
Date: 8/27/21
(month, day, year)

Comment: _____

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

California Form 802
A Public Document

Agency Name

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
Health & Human Services Agency Staff	1	Promoting services and programs available to the public within the county and supporting local charities 
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
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

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

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1. Agency Name

County of Tulare

Division, Department, or Region (if applicable)

Designated Agency Contact (Name, Title)

Jason T. Britt, County Administrative Officer

Area Code/Phone Number

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jtbritt@tularecounty.ca.gov

Date Stamp

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TULARE COUNTY
BOARD OF SUPERVISORS

California Form 802

For Official Use Only

☐ Amendment (Must Provide Explanation in Part 3.)

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 \$ 50.00

Event Description: State of the City - Tulare Chamber

Provide Title/Explanation

Date(s) 08 / 27 / 21

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: _____

Name of Source

Was ticket distribution made at the behest of agency official? Yes ☒ No ☐ If yes: Britt, Jason T.
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
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:
	Vander Poel, Pete	1	Presenting
	Britt, Jason T.	1	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below:
			Promoting county resources and programs
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

Jason T. Britt

Print Name

County Administrative Officer

Title

8/31/21

(month, day, year)

Comment:

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

California **802**
Form

A Public Document

Agency Name

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

B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Valero, Eddie	1	Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i> Promoting county resources and programs
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>

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

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

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1. Agency Name

County of Tulare

Division, Department, or Region (if applicable)

Designated Agency Contact (Name, Title)

Jason T. Britt, County Administrative Officer

Area Code/Phone Number

559-636-5005

E-mail

jtbritt@tularecounty.ca.gov



California Form **802**

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☐ Amendment (Must Provide Explanation in Part 3.)

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 \$ 62.50

Event Description: State of the County - Visalia Chamber

Provide Title/ Explanation

Date(s) 08 / 26 / 21

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒

If no: _____

Name of Source

Was ticket distribution made at the behest of agency official? Yes ☒ No ☐

If yes: Britt, Jason T.

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
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Shuklian, Amy	2	Ceremonial Role ☒ Other ☐ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Presenting
Britt, Jason T.	1	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below: Promoting county resources and programs
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: Jason T. Britt Print Name: County Administrative Officer Title: 8/27/21 (month, day, year)

Comment: _____

Print

Clear

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

California **802**
Form

A Public Document

Agency Name

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

B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Micari, Larry	1	Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i> Promoting county resources and programs
Hess, John	1	Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i> Promoting county resources and programs
Lutz, Tim	1	Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i> Promoting county resources and programs
England, Denise	1	Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i> Promoting county resources and programs

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

Print

Clear

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

A Public Document

1. Agency Name

County of Tulare
Division, Department, or Region (if applicable)

Designated Agency Contact (Name, Title)

Jason T. Britt, County Administrative Officer

Area Code/Phone Number

559-636-5005

E-mail

jtbritt@tularecounty.ca.gov

Date Stamp

RECEIVED

AUG 23 2021

TULARE COUNTY
BOARD OF SUPERVISORS

California
Form **802**

For Official Use Only

☐ Amendment (Must Provide Explanation in Part 3.)

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 \$ 125.00

Event Description: Salt & Light Summer Soiree Fundraise Date(s) 08 / 20 / 21
Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: _____
Name of Source

Was ticket distribution made at the behest of agency official? Yes ☒ No ☐ If yes: Britt, Jason T.
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
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:
	Shuklian, Amy	1	Promoting services available to the public within the Cour
	Valero, Eddie	1	Ceremonial Role ☐ Other ☒ Income ☐ If checking "Ceremonial Role" or "Other" describe below:
			Promoting services available to the public within the Cour
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: Jason T. Britt Print Name: County Administrative Officer Title: 8/23/21
(month, day, year)

Comment:

Print

Clear

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

Agency Name

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

B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
Micari, Larry	2	Promoting services available to the public within the Cour
		Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
Vander Poel, Pete	2	Promoting services available to the public within the Cour
		Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>
Townsend, Dennis	2	Promoting services available to the public within the Cour
		Ceremonial Role ☐ Other ☐ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i>

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

Print

Clear

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2. Function or Event Information

Was ticket distribution made at the behest of agency official? Yes ☐ No ☒ If yes: _____
Official's Name (Last, First)

• 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.

4. Verification

Comment: _____

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

Agency Name
County of Tulare

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

B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Amy Shuklian	1	Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i> Promoting cultural, recreational or educational facilities, service
Eddie Valero	1	Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i> Promoting cultural, recreational or educational facilities, service
Dennis Townsend	1	Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i> Promoting cultural, recreational or educational facilities, service
Larry Micari	1	Ceremonial Role ☐ Other ☒ Income ☐ <i>If checking "Ceremonial Role" or "Other" describe below:</i> Promoting cultural, recreational or educational facilities, service

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