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	Agency Name		Date Stamp	California O O O		
	California Department of Food	l & Agriculture	·	Form 802		
_	Division, Department, or Region			For Official Use Only		
3	32nd District Agricultural Asso	ciation				
Ē	Designated Agency Contact (Na	ame, Title)				
ł	Ken Karns, VP Business Oper	rations			Amendment (Must Pro	vido Evolonation in Part 2 \
Ā	Area Code/Phone Number E	-mail			Amendment (Mast 170	nue Explanation III i alt 3.)
((714) 708-1500	executive@ocfair.c	com		Date of Original Filing: —	(month, day, year)
	Function or Event Inform	ation			40.4	20
	Does the agency have a ticke			ace Value of	Each Ticket/Pass \$ <u>18.</u> 0	
E	Event Description: Cross Roa	ads of the West Gu	un Shows D	Date(s)03	<u>, 26 , 21 </u>	03 <u>, 28 , 21</u>
	Ficket(s)/Pass(es) provided by			no: <u>B&L Pro</u>		
١	Nac ticket distribution made a	it the beheat	┌╴ 。 ┌╴ lf	yes:	Name of Source	
'	Was ticket distribution made a of agency official?	it the benest Yes	LI No⊠ "	yes	Official's Name (Last, First)	
-	Recipients					
	• Use Section A to identify the agency	's department or unit.		dentify an individ	ual. • Use Section C to identify	an outside organization.
	A. Name of Agency, Departs	ment or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made pursu	ant to the agency's policy
	B. Name of Indivic	dual	Number of Ticket(s)/ Passes		Identify one of the fol	owing:
	Rubalcava-Garcia-Natalie	5	Job duties o	nonial Role Other Main of the Coremonial Role or "Other" description of the OCFEC Official regative the event (Policy 2.11		
				Lattendance a		•
	Aitken, Ashleigh		1	Cerem If check Job duties of	nonial Role Other X ding "Ceremonial Role" or "Other" descr the OCFEC Official red	.3.E.iii.b) Income [jibe below: quire his or her
	Aitken, Ashleigh C. Name of Outside Orga (include address and de		1 Number of Ticket(s)/ Passes	Cerem If check Job duties of attendance a	nonial Role Other A	.3.E.iii.b) Income libe below: quire his or her .3.E.iii.b)
	C. Name of Outside Orga (include address and de		Number of Ticket(s)/	Cerem If check Job duties of attendance a	nonial Role Other X sing "Ceremonial Role" or "Other" descr the OCFEC Official red at the event (Policy 2.11	.3.E.iii.b) Income [jbe below: quire his or her .3.E.iii.b)
/ V	Name of Outside Orga	escription)	Number of Ticket(s)/ Passes	Cerem If check Job duties of attendance a Describe th	nonial Role Other in Other or "Other" description of the OCFEC Official recat the event (Policy 2.11 e public purpose made pursu	.3.E.iii.b) Income [ibe below: quire his or her .3.E.iii.b) ant to the agency's policy

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

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1.	Agency Name	10.4			Date Stamp	California 802
	California Department of Fo	•				For Official Use Only
	Division, Department, or Reg			To romand doc ciny		
	32nd District Agricultural As					
	Designated Agency Contact					
	Ken Karns, VP Business O		Amendment (Must F	Provide Explanation in Part 3.)		
	Area Code/Phone Number	E-mail				
	(714) 708-1500	executive@ocfair.c	com		Date of Original Filing:	(month, day, year)
2.	Function or Event Infor	mation				
	Does the agency have a tic	ket policy? Yes	⊠ No□ F	ace Value of	Each Ticket/Pass \$ <u></u>	8.00
	Event Description: Cross F	Roads of the West Gu	un Shows D	Date(s)03	<u>, 26 _/ 21</u>	03 / 28 / 21
	Ticket(s)/Pass(es) provided	by agency? Yes I	□ No 🛛 If	no: B&L Pro	ductions, Inc.	
	() ()	, , ,,			Name of Source	_
	Was ticket distribution made	e at the behest Yes	□ No⊠ ^{If}	yes:	Official's Name (Last, First)	
	of agency official?				Official's Name (Last, 1 list)	
3.	Recipients • Use Section A to identify the ages A. Name of Agency, Dep	· -	Use Section B to i Number of Ticket(s)/ Passes			ntify an outside organization.
			Number			
	B. Name of Ind (Last, Fi		of Ticket(s)/ Passes		Identify one of the	following:
	Cervantes, Sandra		2	Job duties o	nonial Role Other E king "Ceremonial Role" or "Other" do f the OCFEC Official at the event (Policy 2.	escribe below: require his or her
	Ruiz, Robert		3	Job duties o	nonial Role Other Description of the Coremonial Role" or "Other" of the OCFEC Official Lat the event (Policy 2.	escribe below: require his or her
	C. Name of Outside C (include address and	_	Number of Ticket(s)/ Passes	Describe th	e public purpose made pu	rsuant to the agency's policy
4.	Verification					
	I have read and understand Fl with the requirements.	PPC Regulations 18944	1.1 and 18942.	I have verified	that the distribution set t	forth above, is in accordance
	Ken Karns Digitally signed by Ken Karns DD: cn=Ken Karns, o=OCFEC, o email=kkarns@ocfair.com.c=U	s ' Ka	en Karns	17	P Business Operation	ns 4/23/2021
	Date: 2017.01.23 16:23:36-08'0 Signature of Agency Head or Desig		rint Name	v	Title	(month, day, year)
	EC21 02	•				(5, 449, 5041)
	Comment: EU21_U2					

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. /	remonial Role Events Agency Name		Date Stamp	Public Document California		
	California Department of Foo	d & Agriculture	·	Form 802		
Ī	Division, Department, or Regio	n (if applicable)		For Official Use Only		
(32nd District Agricultural Asso	ociation				
Ī	Designated Agency Contact (N	ame, Title)				
ŀ	Ken Karns, VP Business Ope	rations			Amendment (Must Prov	vido Evolonation in Part 2)
7	Area Code/Phone Number E	E-mail			Amendment (Mast 170)	nue Explanation III i alt 3.)
	(714) 708-1500	executive@ocfair.	com		Date of Original Filing: —	(month, day, year)
. !	Function or Event Inform	ation			40.4	20
I	Does the agency have a ticke	et policy? Yes	⊠ No □ F	ace Value of	Each Ticket/Pass \$ <u>18.0</u>	<u> </u>
ı	Event Description: Cross Ro	ads of the West G	un Shows	eate(s)	<u>, 26 , 21 </u>	03 / 28 / 21
-	Γicket(s)/Pass(es) provided b	•		no: <u>B&L Pro</u>	ductions, Inc.	
	At a Calada Pada Cara a la		I f	voo:	Name of Source	
,	Nas ticket distribution made a of agency official?	at the benest Yes	□ No⊠ "	yes:	Official's Name (Last, First)	
-	Recipients					_
	• Use Section A to identify the agency	y's department or unit.	1	dentify an individ	lual. • Use Section C to identify	y an outside organization.
	A. Name of Agency, Depart	ment or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made pursu	ant to the agency's policy
			Number			
	B. Name of Indivi		of Ticket(s)/ Passes		Identify one of the foll	owing:
	Kovacevich, Nick		1	Job duties o	nonial Role Other X king "Ceremonial Role" or "Other" descr f the OCFEC Official red at the event (Policy 2.11	quire his or her
					nonial Role Other Other Sking "Ceremonial Role" or "Other" descr	Income [
	C. Name of Outside Org		Number of Ticket(s)/ Passes	Describe th	e public purpose made pursu	ant to the agency's policy
	Verification	<u> </u>	4.4 and 400.40	I have verified t	that the distribution set fort	th above is in accordance
I	have read and understand FPP	C Regulations 1894	4.1 and 18942.	mave vermea		ii above, is iii accordance
1	Thave read and understand FPP with the requirements. Sen Karns Discrete Karns D	erations	en Karns		P Business Operations	04/23/2021