

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

A Public Document

1. Agency Name		Date Stamp SolTrans MAR - 4 2019	California Form 802 <small>For Official Use Only</small>
Solano County Transit (SolTrans)			
Division, Department, or Region (if applicable) SolTrans Employees & Constituents			
Designated Agency Contact (Name, Title) Suzanne Fredriksen, Board Clerk			
Area Code/Phone Number (707) 736-6993	E-mail suzanne@soltransride.com	<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.)	
		Date of Original Filing: _____ <small>(month, day, year)</small>	

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ 72.50

Event Description: Benicia Chamber Installation Dinner Date(s) 1 / 25 / 19
Provide Title/Explanation

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

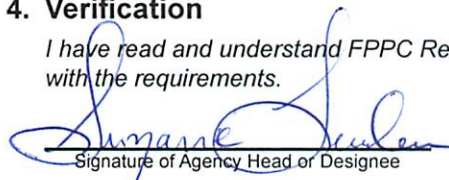
3. Recipients

• 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)	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
BB&B Business Group, 207 Wallace Ave, Vallejo CA 94590	1	To attend an event sponsored by SolTrans
Congressional District 5, 420 Virginia Street, Suite 1-C, Vallejo CA 94590	2	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.

 Signature of Agency Head or Designee	Suzanne Fredriksen Print Name	Board Clerk Title	03/04/2019 <small>(month, day, year)</small>
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Comment: _____

**Agency Report of:
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Continuation Sheet**

Agency Name

Solano County Transit (SolTrans)

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 <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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		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <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
State Assembly District 14, 420 Virginia Street, Suite 1-C, Vallejo CA 94590	1	To attend an event sponsored by SolTrans
Senate District 3, 420 Virginia Street, Suite 1-C, Vallejo CA 94590	1	To attend an event sponsored by SolTrans