

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

A Public Document

1. Agency Name		Date Stamp SolTrans MAY 30 2019	California Form 802
Solano County Transit (SolTrans)			For Official Use Only
Division, Department, or Region (if applicable)		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _____ <small>(month, day, year)</small>	
SolTrans Employee and Constituent			
Designated Agency Contact (Name, Title)			
Suzanne Fredriksen, Board Clerk			
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 \$ \$55

Event Description: Visit Vallejo Tourism Luncheon Date(s) 05 / 08 / 19 _____/_____/_____

Provide Title/Explanation

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

Name of Source

Was ticket distribution made at the behest of agency official? Yes No If yes: _____

Official's Name (Last, First)

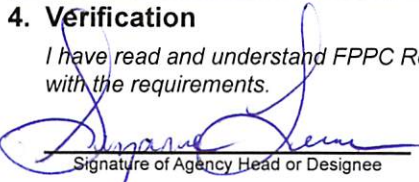
3. Recipients

• 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

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	5/30/2019 <small>(month, day, year)</small>
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Comment: _____