

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

**A Public Document**

<b>1. Agency Name</b> California Department of Food & Agriculture <b>Division, Department, or Region (if applicable)</b> Fairs & Expositions / 22nd District Agricultural Association <b>Designated Agency Contact (Name, Title)</b> Carlene Moore, Chief Executive Officer <b>Area Code/Phone Number</b> 858-755-1161 <b>E-mail</b> info@sdfair.com		Date Stamp <b>California Form 802</b> For Official Use Only
		<input type="checkbox"/> <b>Amendment</b> (Must Provide Explanation in Part 3.) <b>Date of Original Filing:</b> _____ <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 \$ 69.50

Event Description: Disco Biscuits    *Provide Title/Explanation* Date(s) 2 / 1 / 2025    2 / 1 / 2025

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: \_\_\_\_\_  
Official's Name (Last, First)

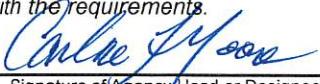
**3. Recipients**

• 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.

<b>A. Name of Agency, Department or Unit</b>	<b>Number of Ticket(s)/Passes</b>	<b>Describe the public purpose made pursuant to the agency's policy</b>		
Administration	2	Attracting and retaining employees (Policy 6.01i)		
<b>B. Name of Individual (Last, First)</b>	<b>Number of Ticket(s)/Passes</b>	<b>Identify one of the following:</b>		
		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>		
<b>C. Name of Outside Organization (include address and description)</b>	<b>Number of Ticket(s)/Passes</b>	<b>Describe the public purpose made pursuant to the agency's policy</b>		

**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

Carlene Moore

Print Name

Chief Executive Officer

Title



(month, day, year)

Comment: \_\_\_\_\_

**Print**

**Clear**

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

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**1. Agency Name**

California Department of Food & Agriculture

**Division, Department, or Region (if applicable)**

Fairs & Expositions / 22nd District Agricultural Association

**Designated Agency Contact (Name, Title)**

Carlene Moore, Chief Executive Officer

Date Stamp

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 \$ 49.50

Event Description: Fortunate Youth  
*Provide Title/ Explanation* Date(s) 2 / 14 / 2025 2 / 14 / 2025

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: \_\_\_\_\_  
*Official's Name (Last, First)*  
of agency official?

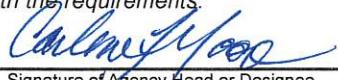
**3. Recipients**

• 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
Administration	2	Attracting and retaining employees (Policy 6.01i)
Agriculture, Arts & Education	2	Attracting and retaining employees (Policy 6.01i)
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> _____
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**

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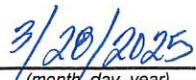
Signature of Agency Head or Designee

Carlene Moore

Print Name

Chief Executive Officer

Title



(month, day, year)

Comment: \_\_\_\_\_

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**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.

<b>A.</b>	<b>Name of Agency, Department or Unit</b>	<b>Number of Ticket(s)/Passes</b>	<b>Describe the public purpose made pursuant to the agency's policy</b>
	Facilities	2	Attracting and retaining employees (Policy 6.01i)
<b>B.</b>	<b>Name of Individual (Last, First)</b>	<b>Number of Ticket(s)/Passes</b>	<b>Identify one of the following:</b>
			<input type="checkbox"/> Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <small>If checking "Ceremonial Role" or "Other" describe below:</small>
			<input type="checkbox"/> Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <small>If checking "Ceremonial Role" or "Other" describe below:</small>
			<input type="checkbox"/> Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <small>If checking "Ceremonial Role" or "Other" describe below:</small>
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<b>C.</b>	<b>Name of Outside Organization (include address and description)</b>	<b>Number of Ticket(s)/Passes</b>	<b>Describe the public purpose made pursuant to the agency's policy</b>

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**1. Agency Name**

California Department of Food & Agriculture

**Division, Department, or Region (if applicable)**

Fairs & Expositions / 22nd District Agricultural Association

**Designated Agency Contact (Name, Title)**

Carlene Moore, Chief Executive Officer

**Area Code/Phone Number**

858-755-1161

**E-mail**

info@sdfair.com

Date Stamp

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 \$ 65.00

Event Description: Hippo Campus Date(s) 2 / 18 / 2025 2 / 18 / 2025

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: \_\_\_\_\_  
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		
	Human Resources	2	Attracting and retaining employees (Policy 6.01i)		
	Public Safety	2	Attracting and retaining employees (Policy 6.01i)		
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"/> If checking "Ceremonial Role" or "Other" describe below:		
			Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> 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

Carlene Moore

Print Name

Chief Executive Officer

Title

3/28/2025  
(month, day, year)

Comment: \_\_\_\_\_

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**Clear**

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**2. Function or Event Information**

Does the agency have a ticket policy? Yes  No  Face Value of Each Ticket/Pass \$ 21.00

Event Description: The Great Junk Hunt Date(s) 2 / 28 / 2025 3 / 1 / 2025  
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: \_\_\_\_\_  
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.

<b>A. Name of Agency, Department or Unit</b>	<b>Number of Ticket(s)/Passes</b>	<b>Describe the public purpose made pursuant to the agency's policy</b>		
Agriculture, Arts & Education	2	Attracting and retaining employees (Policy 6.01i)		
<b>B. Name of Individual (Last, First)</b>	<b>Number of Ticket(s)/Passes</b>	<b>Identify one of the following:</b>		
		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>				
<b>C. Name of Outside Organization (include address and description)</b>	<b>Number of Ticket(s)/Passes</b>	<b>Describe the public purpose made pursuant to the agency's policy</b>		
Toyota - toyota.com	4	Economic / business development (Policy 6.01c)		
Del Mar Thoroughbred Club - dmtc.com	2	Economic / business development (Policy 6.01c)		

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Carlene Moore

Print Name

Chief Executive Officer

Title



(month, day, year)

Comment: \_\_\_\_\_

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**Clear**