

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

**A Public Document**

<b>1. Agency Name</b>		Date Stamp	<b>California Form 802</b>
California Department of Food & Agriculture		For Official Use Only	
<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>	<b>E-mail</b>	<input type="checkbox"/> <b>Amendment</b> (Must Provide Explanation in Part 3.)	
858-755-1161	info@sdfair.com	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 \$ \_\_\_\_\_ 10.00

Event Description: DMTC Summer Race Meet - Sept Date(s) 9 / 1 / 2025 9 / 7 / 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)

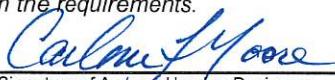
**3. Recipients**

• 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>
<b>B. Name of Individual (Last, First)</b>	<b>Number of Ticket(s)/Passes</b>	<b>Identify one of the following:</b>
Mead, Kathlyn	2	Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below: Economic / business development (Policy 6.01c)
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:
<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

  
10/13/2025  
(month, day, year)

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

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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**

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 \$ 78.00

Event Description: Peter Rowan  
Provide Title/Explanation Date(s) 9 / 10 / 2025 9 / 10 / 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?

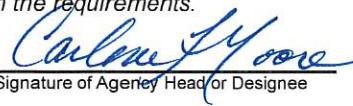
**3. Recipients**

• 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		
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"/> 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		

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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: Tony Ann *Provide Title/ Explanation* Date(s) 9 / 11 / 2025 9 / 11 / 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?

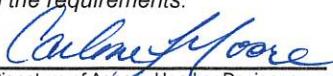
**3. Recipients**

• 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)		
Marketing	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		

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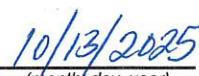
Carlene Moore

Signature of Agency Head or Designee

Print Name

Chief Executive Officer

Title



(month, day, year)

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		<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 \$ 65.00

Event Description: Cuco  
Provide Title/Explanation Date(s) 9 / 18 / 2025 9 / 18 / 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>
Production	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"/> <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>
<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>

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Print Name

Chief Executive Officer

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<p><b>Area Code/Phone Number</b> 858-755-1161    <b>E-mail</b> info@sdfair.com</p>		<input type="checkbox"/> <b>Amendment</b> (Must Provide Explanation in Part 3.) <p><b>Date of Original Filing:</b> _____  (month, day, year)</p>	

**2. Function or Event Information**

Does the agency have a ticket policy? Yes  No  Face Value of Each Ticket/Pass \$ 99.00

Event Description: Howard Jones    Provide Title/ Explanation Date(s) 9 / 20 / 2025    9 / 20 / 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?

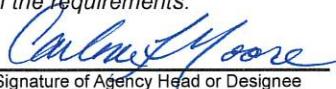
**3. Recipients**

\* 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.

<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)		
Marketing	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>		
Schenk, Frederick	4	Ceremonial Role <input type="checkbox"/>	Other <input checked="" type="checkbox"/>	Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Economic / business development (Policy 6.01c)
		Ceremonial Role <input type="checkbox"/>	Other <input type="checkbox"/>	Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
<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>		
Cutwater - cutwaterspirits.com	4	Economic / business development (Policy 6.01c)		

**4. Verification**

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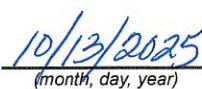
Carlene Moore

Signature of Agency Head or Designee

Print Name

Chief Executive Officer

Title

  
10/13/2025  
(month, day, year)

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

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**2. Function or Event Information**

Does the agency have a ticket policy? Yes  No  Face Value of Each Ticket/Pass \$ 15.00

Event Description: Pet & Reptile Expo    Provide Title/Explanation Date(s) 9 / 20 / 2025    9 / 21 / 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>
Facilities	4	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"/> <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>
<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>

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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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<p><b>Area Code/Phone Number</b> 858-755-1161    <b>E-mail</b> info@sdfair.com</p>		<p><input type="checkbox"/> <b>Amendment</b> (Must Provide Explanation in Part 3.)</p> <p><b>Date of Original Filing:</b> _____            (month, day, year)</p>	

**2. Function or Event Information**

Does the agency have a ticket policy? Yes  No  Face Value of Each Ticket/Pass \$ 65.00

Event Description: The Hives *Provide Title/Explanation* Date(s) 9 / 22 / 2025 9 / 22 / 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)*

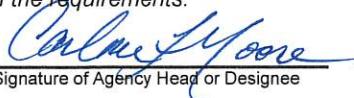
**3. Recipients**

• 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)		
Administration		4	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>		
Southern Wine		4	Economic / business development (Policy 6.01c)		
- 10730 Scripps Ranch Blvd, San Diego, CA 92121					

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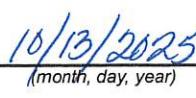
Carlene Moore

Signature of Agency Head or Designee

Print Name

Chief Executive Officer

Title

  
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 (month, day, year)

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

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		<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 \$ 45.00

Event Description: Dabeull  
Provide Title/Explanation  
 Date(s) 9 / 24 / 2025    9 / 24 / 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>		
Sales & Rentals	2	Attracting and retaining employees (Policy 6.01i)		
Ticketing	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>		

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Carlene Moore

Signature of Agency Head or Designee

Print Name

Chief Executive Officer

Title

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

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<p><b>Area Code/Phone Number</b></p> <p>858-755-1161</p>		<p><input type="checkbox"/> <b>Amendment</b> (<i>Must Provide Explanation in Part 3.</i>)</p> <p><b>Date of Original Filing:</b> _____ (month, day, year)</p>	

## 2. Function or Event Information

Does the agency have a ticket policy? Yes  No  Face Value of Each Ticket/Pass \$ 105.00

Event Description: Band of Horses / Iron & Wine Date(s) 9 / 26 / 2025 9 / 26 / 2025

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

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

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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.

<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>					
			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"/>
<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>					

## 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.*

Carlene Moore  
Signature of Agency Head or Designee

Carlene Moore

Print Name

### Chief Executive Officer

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**Title**

10/13/2025  
(month, day, year)

Comment:

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Carlene Moore, Chief Executive Officer			
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858-755-1161	info@sdfair.com	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 \$ 99.50

Event Description: Teskey Brothers Date(s) 9 / 28 / 2025 9 / 28 / 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)

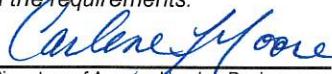
**3. Recipients**

• 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> Name of Agency, Department or Unit	Number of Ticket(s)/Passes	Describe the public purpose made pursuant to the agency's policy		
Sales & Rentals	2	Attracting and retaining employees (Policy 6.01i)		
Facilities	2	Attracting and retaining employees (Policy 6.01i)		
<b>B.</b> Name of Individual (Last, First)	Number of Ticket(s)/Passes	Identify one of the following:		
Mead, Kathryn	4	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Economic / business development (Policy 6.01c)		
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>		
<b>C.</b> Name of Outside Organization (include address and description)	Number of Ticket(s)/Passes	Describe the public purpose made pursuant to the agency's policy		
Pizza Port - pizzaport.com	4	Economic / business development (Policy 6.01c)		
Anheuser-Busch - anheuser-busch.com	4	Economic / business development (Policy 6.01c)		

**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.



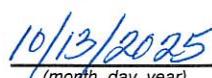
Carlene Moore

Signature of Agency Head or Designee

Print Name

Chief Executive Officer

Title

  
(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.

<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>
<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>
		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>
Miller Consulting - 1155 Camino Del Mar, Suite 124, Del Mar, CA 92014	2	Economic / business development (Policy 6.01c)
Constellation Brands - cbrands.com	2	Economic / business development (Policy 6.01c)

**Print**

**Clear**

**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 \$ 55.00

Event Description: Nathaniel Rateliff Date(s) 9 / 30 / 2025 9 / 30 / 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.

A. Name of Agency, Department or Unit	Number of Ticket(s)/Passes	Describe the public purpose made pursuant to the agency's policy
Facilities	4	Attracting and retaining employees (Policy 6.01i)
B. Name of Individual (Last, First)	Number of Ticket(s)/Passes	Identify one of the following:
Gelfand, Michael	5	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Economic / business development (Policy 6.01c)
Mead, Kathlyn	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Economic / business development (Policy 6.01c)
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.



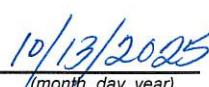
Signature of Agency Head or Designee

Carlene Moore

Print Name

Chief Executive Officer

Title



(month, day, year)

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

**Print**

**Clear**