

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

A Public Document

1 Agency Name 38th District Agricultural Association		Date Stamp	California Form 802 For Official Use Only
Division, Department, or Region (if applicable)			
Street Address 900 N. Broadway, Turlock CA 95380			
Designated Agency Contact (Name, Title) Chris Borovansky, CEO		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: <u>7/17/11</u> (month, day, year)	
Area Code/Phone Number (209) 668-1333	E-mail cpboro@stancofair.com		

2. Function, Event, or Ceremonial Role Information

Title Stanislaus County Fair Face Value of Each Admission \$ 8.00 - 12.00

Description Fair tickets Date(s) 07 / 15 / 11 07 / 24 / 11

Ticket(s)/Admission(s) provided by agency? Yes No If no: _____
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

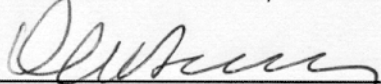
Yes No If yes: _____
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	<ul style="list-style-type: none"> Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.
See "Attachment A"		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>

3. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

 Chris Borovansky CEO 7/17/11
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)