

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

A Public Document

1. Agency Name

Salinas Valley Healthcare System

Date Stamp

California  
Form **802**

Division, Department, or Region (if applicable)

For Official Use Only

Designated Agency Contact (Name, Title)

Gary Ray, Chief Legal Officer

Area Code/Phone Number

831-755-0764

E-mail

gray@SalinasValleyHealth.com

☐ 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 \$ 26.00

Event Description: Rodeo Salinas - General Admission

Date(s) 07 / 18 / 26

Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒

If no: California Rodeo Salinas

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                                                                                                    |
|-------------------------------------------------------------------|-----------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|                                                                   | 22                          |                                                                                                                                                                     |
|                                                                   |                             |                                                                                                                                                                     |
|                                                                   |                             |                                                                                                                                                                     |
| 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"/><br>If checking "Ceremonial Role" or "Other" describe below: |
|                                                                   |                             | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/><br>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.

Gary Ray, SVH CLO  
Gary Ray, SVH CLO (Aug 3, 2026 11:11:08 PDT)

Signature of Agency Head or Designee

Gary Ray

Print Name

Chief Legal Officer

Title

08/03/2026

(month, day, year)

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

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

California **802**  
Form

A Public Document

This form is for use by all state and local government agencies. The form identifies persons that receive admission tickets and passes and describes the public purpose for the distribution. This form was prepared by the Fair Political Practices Commission (FPPC) and is available at [www.fppc.ca.gov](http://www.fppc.ca.gov).

## General Information

FPPC Regulation 18944.1 sets out the circumstances under which an agency's distribution of tickets to entertainment events, sporting events, and like occasions would not result in a gift to individuals that attend the function. In general, the agency must adopt a policy which identifies the public purpose served in distributing the admissions. The Form 802 serves to detail each event and the public purpose of each ticket distribution. FPPC Regulation 18942 lists exceptions to reportable gifts, including ceremonial events, when listed on this form.

When the regulation procedures are followed, persons, organizations, or agencies who receive admissions are listed on a Form 802. Agency officials do not report the admissions on the official's Statement of Economic Interests, Form 700, and the value of the admission is not subject to the gift limit.

The Form 802 also informs the public as to whether the admissions were made at the behest of an agency official and whether the behested tickets were provided to an organization or to specific individuals.

## Exception

FPPC This form is not required for admission provided to a school or university district official, coach, athletic director, or employee to attend an amateur event performed by students of that school or university.

## Reporting and Public Posting

**Ticket Distribution Policies:** An agency must post its ticket policy on its website within 30 days of adoption or amendment and e-mail a link of the website location to FPPC at [form802@fppc.ca.gov](mailto:form802@fppc.ca.gov).

**Form 802:** The use of the ticket or pass under the policy must be reported on Form 802 and posted on the agency's website within 45 days of distribution. A link to the website location of the forms must be e-mailed to FPPC at [form802@fppc.ca.gov](mailto:form802@fppc.ca.gov).

The FPPC will post on its website the link to each agency's policy and completed forms. It is not necessary to send an e-mail each time a new Form 802 is posted. It is only necessary to submit the link if the posting location changes.

This form must be maintained as a public document.

## Privacy Information Notice

Information requested by the FPPC is used to administer and enforce the Political Reform Act. Failure to provide information may be a violation subject to administrative, criminal, or civil penalties. All reports are public records available for inspection and reproduction. Direct questions to FPPC's General Counsel.

## Instructions

### Part 1. Agency Identification:

List the agency's name. Provide a designated agency contact person, their phone number, and e-mail address. Mark the amendment box if changing any information on a previously filed form and include the date of the original filing.

### Part 2. Function or Event Information:

Confirm that your agency has a policy for ticket distribution. Unless the ceremonial role or income box in Part 3, Section B, is marked, this form is only applicable if your agency has a policy.

Complete all of the other required fields that identify the ticket value, description of event, date(s) and whether the ticket was provided by the agency or an outside source. If an agency official behests the tickets, the official's name is also required. Use the comment field or an attachment to explain in full.

### Part 3. Ticket Recipients:

This part identifies who uses the tickets. The identification requirements vary depending upon who received the tickets and are categorized into three sections. Each section must list the number of tickets received. Use the comment field or an attachment to explain in full.

**Section A.** Report tickets distributed to agency staff, other than an elected official or governing board member, pursuant to the agency's policy. It is not necessary to list each employee's name, but identify the unit/department for which the employee works. The agency must describe the public purpose associated with the ticket distribution. A reference to the policy is permissible.

**Section B.** Report: 1) any agency official who performs a ceremonial role; 2) any agency official who reports the value as income; or 3) tickets used by elected officials and governing board members (including those distributed pursuant to the agency's policy).

**Section C.** Report tickets provided to an organization. The organization's name, an address (website url is permissible), and a brief description of the public purpose are required.

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

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.

| A. | Name of Agency, Department or Unit | Number<br>of Ticket(s)/<br>Passes | Describe the public purpose made pursuant to the agency's policy |
|----|------------------------------------|-----------------------------------|------------------------------------------------------------------|
|    |                                    |                                   |                                                                  |
|    |                                    |                                   |                                                                  |
|    |                                    |                                   |                                                                  |
|    |                                    |                                   |                                                                  |

  

| B. | Name of Individual<br>(Last, First) | Number<br>of Ticket(s)/<br>Passes | Identify one of the following:                                                                                                                                             |
|----|-------------------------------------|-----------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
|    |                                     |                                   | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/><br><i>If checking "Ceremonial Role" or "Other" describe below:</i> |
|    |                                     |                                   |                                                                                                                                                                            |
|    |                                     |                                   |                                                                                                                                                                            |
|    |                                     |                                   |                                                                                                                                                                            |
|    |                                     |                                   |                                                                                                                                                                            |

  

| C. | Name of Outside Organization<br>(include address and description) | Number<br>of Ticket(s)/<br>Passes | Describe the public purpose made pursuant to the agency's policy |
|----|-------------------------------------------------------------------|-----------------------------------|------------------------------------------------------------------|
|    |                                                                   |                                   |                                                                  |
|    |                                                                   |                                   |                                                                  |
|    |                                                                   |                                   |                                                                  |
|    |                                                                   |                                   |                                                                  |
|    |                                                                   |                                   |                                                                  |