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

A Public Document

1. Agency Name
County of Los Angeles Dept. of Public Works

Division, Department, or Region *(if applicable)*
Public Relations Group

Street Address
900 S. Fremont Ave. 9th Floor, Alhambra, CA 91803

Designated Agency Contact *(Name, Title)*
Kimberly Y. Lyman Management Specialist I

Area Code/Phone Number (626)458-5975

E-mail klyman@dpw.lacounty.gov

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, Event, or Ceremonial Role Information

Title L.A. Clippers vs. Houston Rockets basketball game

Face Value of Each Admission $ 150.00

Description Game Ball Presentation

Date(s) 3/2/11 ___/___/___

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☑ If no: KFWB Radio Station
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	• 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.	
County of Los Angeles Stormwater Program		Yes ☐ No ☐		Income ☐
Pestrella, Mark	1	Yes ☑ No ☐	Ceremonial Role: Participant in the game ball presentation	Income ☐
Spencer, Bob	1	Yes ☑ No ☐	The job duties of this employee required his attendance at this event.	Income ☐
Lee, Kerjon	1	Yes ☑ No ☐	The job duties of this employee required his attendance at this event.	Income ☐
		Yes ☐ No ☐		Income ☐

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.

Signature of Agency Head or Designee | Jacob Williams (Print Name) | Asst. Director (Title) | 4-19-11 *(month, day, year)*

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

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☐ **Amendment** *(Must provide explanation in Part 3.)*

Date of Original Filing: _____ *(month, day, year)*

2. Function, Event, or Ceremonial Role Information

Title L.A. Clippers vs. Denver Nuggets basketball game.

Face Value of Each Admission $ 150.00

Description same as above

Date(s) 3/5/11 ___/___/___

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☑ If no: KFWB Radio Station *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*

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Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	• 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.	
County of Los Angeles Stormwater Program		Yes ☐ No ☐		Income ☐
Lew, Michele M.	2	Yes ☐ No ☑	For use in connection with a County employee competition/drawing.	Income ☐
Lopez, Gabriel	2	Yes ☐ No ☑	"	"Income ☐
Moore, Jason	2	Yes ☐ No ☑	"	"Income ☐
		Yes ☐ No ☐		Income ☐

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.

Signature of Agency Head or Designee: [signature] | Print Name: Jacob Williams | Title: Asst. Director | *(month, day, year)*: 4·19·11

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