

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

A Public Document

| | | | |
|---|-----------------------------|--|---|
| 1. Agency Name | | Date Stamp | California Form 802 For Official Use Only |
| Los Angeles County Arts Commission | | | |
| Division, Department, or Region (If Applicable) | | | |
| 1055 Wilshire Blvd. Suite 800 | | | |
| Designated Agency Contact (Name, Title) | | | |
| Miriam Gonzalez | | | |
| Area Code/Phone Number | E-mail | <input type="checkbox"/> Amendment (Must provide explanation in Part 3.) | |
| 213 202-5858 | mgonzalez@arts.lacounty.gov | Date of Original Filing: _____ (Month, Day, Year) | |

2. Function or Event Information

Does the agency have a ticket policy? Yes No

Event Description: Ma Rainey
Provide Title/Explanation

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

Was ticket distribution made at the behest of agency official? No Yes

Face Value of Each Ticket/Pass \$ 55

Date(s) 9 / 7 / 16

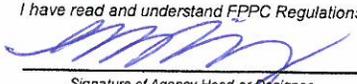
If no: Center Theatre Group
Name of Source

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)/Pass(es) | Describe the public purpose made pursuant to the agency's policy |
|---|------------------------------|--|
| Arts Commission | 2 | Policy 5.3.b _ job duties of the official |
| | | |
| B. Name of Individual (Last, First) | Number of Ticket(s)/Pass(es) | Identify one of the following: |
| | | 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> |
| C. Name of Outside Organization (Include address and description) | Number of Ticket(s)/Pass(es) | 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.


Miriam Gonzalez
Executive Assistant
10/4/16

Signature of Agency Head or Designee
Print Name
Title
(Month, Day, Year)

Comment: _____

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| Area Code/Phone Number | E-mail | <input type="checkbox"/> Amendment (Must provide explanation in Part 3.) | |
| 213 202-5858 | mgonzalez@arts.lacounty.gov | Date of Original Filing: 9/28/16 (Month, Day, Year) | |

2. Function or Event Information

Does the agency have a ticket policy? Yes No

Event Description: NACO Conference Awards Luncheon
Provide Title/Explanation

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

Was ticket distribution made at the behest of agency official? No Yes

Face Value of Each Ticket/Pass \$ 165 (conf day rate)

Date(s) 7 / 24 / 16

If no: NACO
Name of Source

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)/Pass(es) | Describe the public purpose made pursuant to the agency's policy |
|---|------------------------------|---|
| | | |
| | | |
| B. Name of Individual (Last, First) | Number of Ticket(s)/Pass(es) | Identify one of the following: |
| Lesnik, Peter - Commissioner | 1 | Ceremonial Role <input checked="" type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> For presentation of Arts Advocacy Award to Sup Knabe |
| | | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> |
| | | |
| C. Name of Outside Organization (Include address and description) | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency's policy |
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| Miriam Gonzalez | | | |
| Area Code/Phone Number | E-mail | | |
| 213 202-5858 | mgonzalez@arts.lacounty.gov | | |

2. Function or Event Information

Does the agency have a ticket policy? Yes No

Event Description: Father Comes Home from the War
Provide Title/Explanation

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

Was ticket distribution made at the behest of agency official? No Yes

Face Value of Each Ticket/Pass \$ 55

Date(s) 5 / 7 / 16

If no: Center Theatre Group
Name of Source

If yes: _____
Official's Name (Last, First)

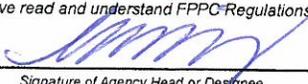
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| A. Name of Agency, Department or Unit | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency's policy |
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| Arts Commission | 2 | Policy 5.3.b _ job duties of the official |
| | | |
| B. Name of Individual (Last, First) | Number of Ticket(s)/Pass(es) | Identify one of the following: |
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| C. Name of Outside Organization (Include address and description) | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency's policy |
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|  | Miriam Gonzalez | Executive Assistant | 10/4/16 |
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2. Function or Event Information

Does the agency have a ticket policy? Yes No

Event Description: Dreamgirls Provide Title/Explanation

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

Was ticket distribution made at the behest of agency official? No Yes

Face Value of Each Ticket/Pass \$ 55

Date(s) 5 / 6 / 16

If no: Valley Performing Arts Center Name of Source

If yes: _____ Official's Name (Last, First)

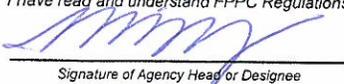
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2. Function or Event Information

Does the agency have a ticket policy? Yes No

Event Description: Endgame
Provide Title/Explanation

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

Was ticket distribution made at the behest of agency official? No Yes

Face Value of Each Ticket/Pass \$ 45

Date(s) 5 / 1 / 16

If no: Center Theatre Group
Name of Source

If yes: _____
Official's Name (Last, First)

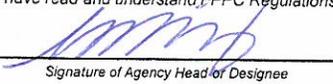
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