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

1. Agency Name
   County of Los Angeles
   Board of Supervisors, Third District
   Yolanda Valadez, Ticket Administrator
   213 974-3333 yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $ 35 - $ 36
   Event Description: Provide Title/Explanation
   Date(s) 7/18/17 8/24/17
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   If yes: Hollywood Bowl
   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

   B. Name of Individual
      (Last, First)
      Number of Ticket(s)/Passes
      Identify one of the following:
      Ceremonial Role ☐ Other ☐ Income ☐
      If checking "Ceremonial Role" or "Other" describe below:
      Ceremonial Role ☐ Other ☐ Income ☐
      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.
   Yolanda Valadez
   Ticket Administrator
   10/2/17
   Comment: 25 tickets per concert date.

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
County of Los Angeles
Division, Department, or Region (if applicable)
Board of Supervisors, Third District
Designated Agency Contact (Name, Title)
Yolanda Valadez, Ticket Administrator
Area Code/Phone Number 213 974-3333
E-mail yvaladez@bos.lacounty.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☒ No ☐
Face Value of Each Ticket/Pass $ 35 - $ 36
Event Description: Provide Title/Explanation
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
Date(s) 7/15/17 7/22/17
If no: Hollywood Bowl
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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Last, First)</td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
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<th>C. Name of Outside Organization</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>West Knoll Residence Council</td>
<td>100</td>
<td></td>
</tr>
</tbody>
</table>

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 Yolanda Valadez
Print Name Ticket Administrator
Title 7/22/17 (month, day, year)

Comment: 50 tickets per concert date.
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions
A Public Document

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (If applicable)
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number
   213 974-3333
   E-mail
   yvaladez@bos.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 or Event Information
   Does the agency have a ticket policy? Yes ☒ No □
   Event Description: ____________________________________________________________________________
   Face Value of Each Ticket/Pass $________ (N): ________ (10)
   Date(s) 7/18/17 7/20/17
   Ticket(s)/Pass(es) provided by agency? Yes ☒ No □
   If no: Hollywood Bowl
   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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
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<tbody>
<tr>
<td></td>
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<tr>
<td></td>
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</tbody>
</table>

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<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
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<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
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</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valley Storrfont Jewish Family</td>
<td>80</td>
<td></td>
</tr>
</tbody>
</table>

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: __________________________
Yolanda Valadez
Ticket Administrator
Print Name
Title
10/2/17 (month, day, year)

Comment: 7/22/17 (25 tickets)

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number  E-mail
   213 974-3333  yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy?  Yes ☒  No ☐
   Face Value of Each Ticket/Pass $35 - $36
   Event Description:  Provide Title/Explanation
   Date(s)  7/20/17  8/11/17
   Ticket(s)/Pass(es) provided by agency?  Yes ☐  No ☒
   If no:  Hollywood Bowl
   Name of Source
   If yes:  Official's Name (Last, First)
   Was ticket distribution made at the behest of agency official?  Yes ☒  No ☐

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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
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<th>B. Name of Individual (Last, First)</th>
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<th>Identify one of the following:</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐  Other ☐  Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐  Other ☐  Income ☐</td>
</tr>
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<tr>
<th>C. Name of Outside Organization</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valley Self Help Center</td>
<td>30</td>
<td></td>
</tr>
</tbody>
</table>

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  Yolanda Valadez  Ticket Administrator  10/12/17
   (month, day, year)

   Comment: 15 tickets per consent date.
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number 213 974-3333
   E-mail yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $35 - $36
   Event Description: Provide Title/Explanation
   Date(s) 8/24/17
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   If no: Hollywood Bowl
   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.

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<tr>
<th>A. Name of Agency, Department or Unit</th>
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<tr>
<td>UCLA Hills</td>
<td>20</td>
<td></td>
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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: Yolanda Valadez
   Print Name: Ticket Administrator
   Title: 10/2/17
   (month, day, year)

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

1. Agency Name
County of Los Angeles
Division, Department, or Region (if applicable)
Board of Supervisors, Third District
Designated Agency Contact (Name, Title)
Yolanda Valadez, Ticket Administrator
Area Code/Phone Number E-mail
213 974-3333 yvaladez@bos.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 or Event Information
Does the agency have a ticket policy? Yes ☑ No ☐ Face Value of Each Ticket/Pass $35-$36
Event Description: Provide Title/Explanation
Date(s) 7/1/17 8/1/17
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑ If no: Hollywood Bowl
Was ticket distribution made at the behest of agency official? Yes ☑ No ☐ If yes: Name of Source

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.

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<th>A. Name of Agency, Department or Unit</th>
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| Ceremonial Role ☐ Other ☐ Income ☐ |
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Topanga Youth Services 50

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
Yolanda Valadez
Print Name
Ticket Administrator
Title 10/2/17
(month, day, year)

Comment:

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Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Board of Supervisors, Third District
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number: 213 974-3333
   E-mail: yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $35 - $36
   Event Description: Provide Title/Explaination
   Date(s): 8/10/17 8/24/17
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   If no: Hollywood Bowl
   If yes: Official's Name (Last, First)
   Was ticket distribution made at the behest of agency official? Yes ☒ No ☐

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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
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</tr>
</thead>
<tbody>
<tr>
<td>The Village Family Services</td>
<td>50</td>
<td></td>
</tr>
</tbody>
</table>

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: Yolanda Valadez, Ticket Administrator: 10/2/17
   Comment: 25 tickets per concert date.

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Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Board of Supervisors, Third District
   Yolanda Valadez, Ticket Administrator

   Area Code/Phone Number  E-mail
   213 974-3333  yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Event Description:  
   Face Value of Each Ticket/Pass $35-38
   Date(s) 7/18/17  8/3/17
   If no: Hollywood Bowl
   If yes: 

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
   
   B. Name of Individual (Last, First)  Number of Ticket(s)/Passes  Identify one of the following:
   Ceremonial Role ☐ Other ☐ Income ☐
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   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
   The Teen Project 40

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: ___________________________  Print Name: Yolanda Valadez  Title: Ticket Administrator
   Date: 10/2/17 (month, day, year)

   Comment: 20 tickets per consent date.
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
County of Los Angeles
Division, Department, or Region (if applicable)
Board of Supervisors, Third District
Designated Agency Contact (Name, Title)
Yolanda Valadez, Ticket Administrator
Area Code/Phone Number
213 974-3333
E-mail
yvaladez@bos.lacounty.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☒ No ☐
Face Value of Each Ticket/Pass $35 - $380
Event Description: Provide Title/Explanation
Date(s) 7/20/17 9/14/17
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
If no: Hollywood Bowl
Name of Source:
If yes: Official's Name (Last, First)
Was ticket distribution made at the behest of agency official? Yes ☒ No ☐

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.

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<tr>
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<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sylmar Women's Club</td>
<td>40</td>
<td></td>
</tr>
</tbody>
</table>

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.

Yolanda Valadez, Ticket Administrator
Signature of Agency Head or Designee
Print Name
Title
10/2/17
(month, day, year)

Comment: 20 tickets for each consent date.

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Board of Supervisors, Third District
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number: 213 974-3333
   E-mail: yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Event Description: [Provide Title/Explanation]
   Face Value of Each Ticket/Pass: $35 - $36 (15)
   Date(s): 7/20/17, 8/1/17
   If no: Hollywood Bowl
   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.

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<tr>
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   | Name of Individual               | Number of Ticket(s)/Passes | Identify one of the following:                               |
   | (Last, First)                    |                           | Ceremonial Role ☐ Other ☐ Income ☐                          |
   |                                  |                           | Ceremonial Role ☐ Other ☐ Income ☐ If checking "Ceremonial Role" or "Other" describe below: |
   |                                  |                           |                                                               |

   | Name of Outside Organization     | Number of Ticket(s)/Passes | Describe the public purpose made pursuant to the agency's policy |
   | (include address and description)|                           |                                                               |
   | St. Sebastian                    | 48                         |                                                               |

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: [Signature]
   Yolanda Valadez
   Print Name: Yolanda Valadez
   Ticket Administrator Title: [Title]
   Date: 10/12/17 (month, day, year)
   Comment: 9/14/17 (18 tickets)
1. Agency Name
   County of Los Angeles
   Board of Supervisors, Third District
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number | E-mail
   213 974-3333 | yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Event Description: ________________________________
   Face Value of Each Ticket/Pass $35-536
   Date(s) 7-27-17 8-22-17
   Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐
   If no: Hollywood Bowl
   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)/Passes | Describe the public purpose made pursuant to the agency's policy

B. Name of Individual (Last, First) | Number of Ticket(s)/Passes | Identify one of the following:
   Ceremonial Role ☐ Other ☐ Income ☐
   Ceremonial Role ☐ Other ☐ Income ☐
   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
   St. Joseph’s Center 50

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: ____________________________
   Print Name: ____________________________
   Title: ____________________________ (month, day, year)

   Comment: 25 tickets for each concert date.
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number
   213 974-3333
   E-mail
   yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Event Description:
   Provide Title/Explanation
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   Face Value of Each Ticket/Pass $35 - $36
   Date(s) 7/13/17, 8/22/17
   Was ticket distribution made at the behest of agency official? Yes ☒ No ☐
   If yes:
   Name of Source: Hollywood Bowl
   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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>SNH Emeritus College</td>
<td>50</td>
<td></td>
</tr>
</tbody>
</table>

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]
   Yolanda Valadez
   Ticket Administrator
   10/21/17 (month, day, year)

   Comment: 25 tickets for each concert date.
Agency Report of: 
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number
   213 974-3333
   E-mail
   yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? ☑ No ☐
   Event Description: ____________________________
   Provide Title/Explanation
   Ticket(s)/Pass(es) provided by agency? ☑ No ☐
   Face Value of Each Ticket/Pass $ 35 - 36
   Date(s) 8/3/17 8/22/17
   If no: Hollywood Bowl
   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

   B. Name of Individual
      Number of Ticket(s)/Passes
      Identify one of the following:
      Ceremonial Role ☐ Other ☐ Income ☐
      If checking "Ceremonial Role" or "Other" describe below:

   C. Name of Outside Organization
      Number of Ticket(s)/Passes
      Describe the public purpose made pursuant to the agency's policy

   Sam Fernando Kiwanis
      Club
      50

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
   Yolanda Valadez
   Ticket Administrator
   (month, day, year)
   Comment: 25 tickets for each concert date.

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number: 213 974-3333
   E-mail: yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass: $35 - $36
   Event Description:
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   Date(s): 7/29/17 8/24/17
   If no: Hollywood Bowl
   Name of Source
   Was ticket distribution made at the behest of agency official? Yes ☒ No ☐
   If yes:

3. Recipients
   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Passes
      Describe the public purpose made pursuant to the agency's policy

   B. Name of Individual
      (Last, First)
      Number of Ticket(s)/Passes
      Identify one of the following:
      Ceremonial Role ☐ Other ☐ Income ☐
      If checking "Ceremonial Role" or "Other" describe below:
      Ceremonial Role ☐ Other ☐ Income ☐
      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.
   Signature of Agency Head or Designee
   Yolanda Valadez
   Print Name
   Ticket Administrator
   Title
   10/24/17
   (month, day, year)

Comment: 25 tickets for each concert date.
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (If applicable)
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number 213 974-3333
   E-mail yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Face Value of Each Ticket/Pass $ 35 - $36
   Event Description: Hollywood Bowl
   Date(s) 8/10/17 9/14/17
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   If no: Hollywood Bowl
   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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
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<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
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<th>Identify one of the following:</th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
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</table>

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<tr>
<th>C. Name of Outside Organization (include address and description)</th>
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<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>ONEgeneration Senior Sycamore</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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 Yolanda Valadez Ticket Administrator
   Print Name Title
   (month, day, year) 10/12/17

   Comment: 25 tickets per concert date.
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Yolanda Valadez, Ticket Administrator

   Area Code/Phone Number  E-mail
   213 974-3333  yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy?  Yes ☑  No ☐
   Face Value of Each Ticket/Pass $ 35 - $ 360
   Event Description: Hollywood Bowl
   Date(s) 7/13/17
   Ticket(s)/Pass(es) provided by agency?  Yes ☑  No ☐
   If no: Hollywood Bowl
   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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
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<tr>
<th>B. Name of Individual (Last, First)</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>NCSW</td>
<td>20</td>
<td></td>
</tr>
</tbody>
</table>

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  Yolanda Valadez  Title
   Print Name  Ticket Administrator  (month, day, year)

   Comment: ___________________________
1. **Agency Name**
   - County of Los Angeles
   - Division, Department, or Region (if applicable)
   - Board of Supervisors, Third District
   - Designated Agency Contact (Name, Title)
   - Yolanda Valadez, Ticket Administrator

   **Area Code/Phone Number**
   - 213 974-3333

   **E-mail**
   - yvaladez@bos.lacounty.gov

2. **Function or Event Information**
   - Does the agency have a ticket policy? Yes [x] No [ ]
   - Face Value of Each Ticket/Pass $25-$310
   - Event Description: _Provide Title/Explanation_.
   - Date(s) 7/20/17 8/1/17
   - Ticket(s)/Pass(es) provided by agency? Yes [ ] No [x]
   - Name of Source: Hollywood Bowl
   - If no: _Name of Source_.
   - Was ticket distribution made at the behest of agency official? Yes [ ] No [x]
   - 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**

   **B. Name of Individual**
   - (Last, First)
   - **Number of Ticket(s)/Passes**
   - **Identify one of the following:**
     - Ceremonial Role [ ] Other [ ]
     - Income [ ]
   - 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**

   **MEND**
   - 200

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_
   - Yolanda Valadez
   - Print Name
   - Title
   - Date (month, day, year)
   - 10/2/17

   **Comment:** 50 tickets for each concert date.

   8/13/17 & 8/10/17
1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number 213 974-3333
   E-mail yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Face Value of Each Ticket/Pass $25 - $36
   Event Description: 
   Provide Title/Explanation 
   Date(s) 7/13/17
   Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐
   If yes: Hollywood Bowl
   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.

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
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</thead>
<tbody>
<tr>
<td></td>
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<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
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<tbody>
<tr>
<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Magnolia Science</td>
<td>25</td>
<td></td>
</tr>
</tbody>
</table>

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 Yolanda Valadez Ticket Administrator 10/12/17
   (month, day, year)

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

1. Agency Name
   County of Los Angeles
   Board of Supervisors, Third District
   Yolanda Valadez, Ticket Administrator

   Area Code/Phone Number: 213 974-3333
   E-mail: yvaladez@bos.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 or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Event Description: [Provide Title/Explanation]
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   Was ticket distribution made at the behest of agency official? Yes ☐ No ☑

   Face Value of Each Ticket/Pass $35 - $36
   Date(s) 8/22/17 9/14/17
   If no: Hollywood Bowl
   Name of Source

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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>B. Name of Individual</td>
<td>Number of Ticket(s)/Passes</td>
<td>Identify one of the following:</td>
</tr>
<tr>
<td>(Last, First)</td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
</tbody>
</table>

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

   Las Palmas Park 50

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: [Signature]
   Yolanda Valadez
   Ticket Administrator
   Print Name
   Title
   Verification Date: 10/2/17
   (month, day, year)

   Comment: 25 tickets for each concert date.
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Board of Supervisors, Third District
   Yolanda Valadez, Ticket Administrator
   213 974-3333 yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Face Value of Each Ticket/Pass $ 35 – $ 36
   Event Description: Provide Title/Explanation
   Date(s) 7/13/17 7/20/17
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   If no: Hollywood Bowl
   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)/Passes | Describe the public purpose made pursuant to the agency's policy

   B. Name of Individual (Last, First) | Number of Ticket(s)/Passes | Identify one of the following:
   Ceremonial Role ☐ Other ☐ Income ☐
   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
   LACER After School Programs | 50

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: Yolanda Valadez
   Print Name: Ticket Administrator
   Title: 10/12/17 (month, day, year)
   Comment: 25 tickets for each concert date.
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Board of Supervisors, Third District
   Yolanda Valadez, Ticket Administrator

   Area Code/Phone Number: 213 974-3333
   E-mail: yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $25 - $30
   Event Description: Helsinki Memorial

   Date(s): 7/13/17 8/10/17

   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   Name of Source: Hollywood Bowl

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

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
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<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
<th>Ceremonial Role ☐ Other ☐ Income ☐</th>
</tr>
</thead>
<tbody>
<tr>
<td>LA Museum of the Holocaust</td>
<td>50</td>
<td>If checking “Ceremonial Role” or “Other” describe below:</td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
</tbody>
</table>

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: Yolanda Valadez
   Print Name: Ticket Administrator
   Title: 10/12/17 (month, day, year)

   Comment: 25 tickets for each concert date.
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number 213 974-3333
   E-mail yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Face Value of Each Ticket/Pass $35 - $436
   Event Description: Hollywood Bowl
   Date(s) 8/24/17 9/14/17
   Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐
   If no: Hollywood Bowl
   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

   B. Name of Individual (Last, First)
      Number of Ticket(s)/Passes
      Identify one of the following:
      Ceremonial Role ☐ Other ☐ Income ☐
      If checking "Ceremonial Role" or "Other" describe below:

   C. Name of Outside Organization (include address and description)
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      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

   Yolanda Valadez
   Print Name

   Ticket Administrator
   Title

   Comment: 25 tickets for each concert date.

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
County of Los Angeles
Division, Department, or Region (if applicable)
Board of Supervisors, Third District
Designated Agency Contact (Name,Title)
Yolanda Valadez, Ticket Administrator
Area Code/Phone Number E-mail
213 974-3333 yvaladez@bos.lacounty.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No ☐
Face Value of Each Ticket/Pass $ 25 - $ 36
Event Description: Provide Title/Explaination
Date(s) 8/24/17 9/14/17
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑ If no: Hollywood Bowl
Was ticket distribution made at the behest of agency official? Yes ☑ No ☐

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

B. Name of Individual (Last, First) Number of Ticket(s)/Passes Identify one of the following:

- Ceremonial Role ☐ Other ☐ Income ☐
  If checking "Ceremonial Role" or "Other" describe below:

- Ceremonial Role ☐ Other ☐ Income ☐
  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

LA LGBT Center, Clinical Programs/Mental Health

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 Yolanda Valadez Print Name Ticket Administrator Title (month, day, year)

Comment: 25 tickets for each concert date.

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Board of Supervisors, Third District
   Yolanda Valadez, Ticket Administrator
   213 974-3333  yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Event Description: ________________________________
   Face Value of Each Ticket/Pass $35 - $36
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   Date(s) 7/13/17
   Was ticket distribution made at the behest of agency official? Yes ☐ No ☑
   Name of Source: Hollywood Bowl
   Name of 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.

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tbody>
</table>

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<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
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</table>

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<thead>
<tr>
<th>Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>LA Family Housing</td>
<td>25</td>
<td></td>
</tr>
</tbody>
</table>

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: __________________________
   Yolanda Valadez, Ticket Administrator
   Print Name: __________________________
   Title: __________________________
   Date of Filing: 1/12/17

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Yolanda Valadez, Ticket Administrator

   Area Code/Phone Number 213 974-3333
   E-mail yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $35 - $36
   Event Description: ____________________________
   Date(s) 7/18/17 8/10/17
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   Name of Source Hollywood Bowl
   Was ticket distribution made at the behest of agency official? Yes ☒ No ☐

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

   B. Name of Individual
   (Last, First)
   Number of Ticket(s)/Passes
   Identify one of the following:
   Ceremonial Role ☐ Other ☐ Income ☐
   If checking “Ceremonial Role” or “Other” describe below:
   Ceremonial Role ☐ Other ☐ Income ☐
   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
   JVS West Hollywood Career Center 50

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
   Yolanda Valadez
   Print Name
   Ticket Administrator
   Title
   (month, day, year)
   Comment: 25 tickets for each consent date.

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
County of Los Angeles
Division, Department, or Region (if applicable)
Board of Supervisors, Third District
Designated Agency Contact (Name, Title)
Yolanda Valadez, Ticket Administrator
Area Code/Phone Number E-mail
213 974-3333 yvaladez@bos.lacounty.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes X No □
Event Description: ☐
Ticket(s)/Pass(es) provided by agency? Yes □ No X
Was ticket distribution made at the behest of agency official? Yes X No □
Face Value of Each Ticket/Pass $35 - $360
Date(s) 7/27/17 8/22/17
If yes: Hollywood Bowl
Name of Source
If no: 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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role □ Other □ Income □</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role □ Other □ Income □</td>
</tr>
<tr>
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<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>JFS-SDVA Community Food &amp; Resource Program</td>
<td>45</td>
<td>Food Pantry</td>
</tr>
</tbody>
</table>

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.

Yolanda Valadez
Ticket Administrator

Signature of Agency Head or Designee
Print Name
Title
Date (month, day, year)

Comment:
A Public Document

1. Agency Name
   County of Los Angeles
   Board of Supervisors, Third District
   Yolanda Valadez, Ticket Administrator
   213 974-3333  yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes □ No ☒ Face Value of Each Ticket/Pass $ 35 - 36
   Event Description: Provide Title/Explanation
   Date(s) 7/27/17  9/14/17
   Ticket(s)/Pass(es) provided by agency? Yes □ No ☒ If no: Hollywood Bowl
   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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
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<td></td>
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</table>

   | B. Name of Individual (Last, First) | Number of Ticket(s)/Passes | Identify one of the following:
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<td></td>
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<tr>
<th>C. Name of Outside Organization (include address and description)</th>
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<th>Describe the public purpose made pursuant to the agency's policy</th>
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</thead>
<tbody>
<tr>
<td>JFS - Holocaust Survivor Program</td>
<td>50</td>
<td></td>
</tr>
</tbody>
</table>

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: Yolanda Valadez
   Print Name: Yolanda Valadez
   Title: Ticket Administrator
   Date: 10/12/17

Comment: 25 tickets for each concert date.
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number
   213 974-3333
   E-mail
   yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Event Description: ____________________________
   Face Value of Each Ticket/Pass $35 - $36 (19) 8/10/17 8/24/17 (24)
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   Date(s) 8/10/17 8/24/17
   If no: Hollywood Bowl
   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.

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<tr>
<th>Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing Authority LA County</td>
<td>53</td>
<td></td>
</tr>
</tbody>
</table>

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.

Yolanda Valadez
Ticket Administrator

Signature of Agency Head or Designee
Comment: 9/14/17 (10 tickets)

California Form 802
For Official Use Only

Date Stamp

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
County of Los Angeles
Division, Department, or Region (if applicable)
Board of Supervisors, Third District
Designated Agency Contact (Name, Title)
Yolanda Valadez, Ticket Administrator
Area Code/Phone Number 213 974-3333 E-mail yvaladez@bos.lacounty.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass $ 35 - $ 36
Event Description: Date(s) 8/31/17 8/22/17
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ Hollywood Bowl Name of Source
Was ticket distribution made at the behest of agency official? Yes ☐ No ☒ 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.

<table>
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<th>Name of Agency, Department or Unit</th>
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<td></td>
<td>Other ☐ Income ☐</td>
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<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Housing Works</td>
<td>50</td>
<td></td>
</tr>
</tbody>
</table>

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.

Yolanda Valadez
Ticket Administrator

Signature of Agency Head or Designee
Print Name
Title

Comment: 25 tickets for each concert date.
1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number 213 974-3333
   E-mail yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Event Description: ________________________________
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   Face Value of Each Ticket/Pass $35.00
   Date(s) 8/1/17 8/10/17
   If no: Hollywood Bowl
   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.
   
<table>
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<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
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<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
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<thead>
<tr>
<th>Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Griffith Park Adult Community Center</td>
<td>50</td>
<td></td>
</tr>
</tbody>
</table>

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 Yolanda Valadez
   Print Name Ticket Administrator
   Title
   Date of Original Filing: (month, day, year)
   Comment: 25 tickets for each concert date.
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Board of Supervisors, Third District
   Yolanda Valadez, Ticket Administrator

   213 974-3333
   yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy?   Yes [x]  No [ ]
   Event Description: ________________
   Face Value of Each Ticket/Pass $35 - $50
   Date(s) 7/12/17 9/14/17
   Ticket(s)/Pass(es) provided by agency?   Yes [x]  No [ ]
   If no: Hollywood Bowl
   Was ticket distribution made at the behest of agency official?   Yes [x]  No [ ]
   If yes: ________________________________

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.

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
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   | Name of Individual
     (Last, First) | Number of Ticket(s)/Passes | Identify one of the following: |
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role [ ]  Other [ ]  Income [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
</tbody>
</table>

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

   Friends of the Family 50

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.

   Yolanda Valadez
   Ticket Administrator

   Signature of Agency Head or Designee
   Print Name
   Title
   (month, day, year)

   Comment: 25 tickets for each concert date.
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number
   213 974-3333
   E-mail
   yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $25 - $36
   Event Description: [Provide Title/Explanation]
   Date(s) 7/18/17 8/1/17
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   If no: Hollywood Bowl
   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)/Passes
      Describe the public purpose made pursuant to the agency's policy

   B. Name of Individual (Last, First)
      Number of Ticket(e)/Passes
      Identify one of the following:
      Ceremonial Role ☐ Other ☐ Income ☐
      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

      El Nido
      45

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
   Yolanda Valadez
   Print Name
   Ticket Administrator
   Title
   (month, day, year)

   Comment: 8/13/17 (13 tickets) 8/24/17 (2 tickets)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number
   213 974-3333
   E-mail
   yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? □ Yes ☑ No □
   Face Value of Each Ticket/Pass $ 25-
   Event Description: ____________________________
   Date(s) 8/3/17
   Ticket(s)/Pass(es) provided by agency? □ Yes ☑ No □
   Name of Source Hollywood Bowl
   If no: ____________
   Was ticket distribution made at the behest of agency official? □ Yes ☑ No □
   If yes: ____________

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
   ____________________________

   B. Name of Individual
      (Last, First) | Number of Ticket(s)/Passes | Identify one of the following:
      Ceremonial Role □ Other □ Income □
      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
      Congregation Shiratay Tefila | 40

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
   Yolanda Valadez
   Print Name
   Ticket Administrator
   Title
   Date 10/21/17
   (month, day, year)

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

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number
   213 974-3333
   E-mail
   yvaladez@bos.laounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Event Description: [Provide Title/Explanation]
   Face Value of Each Ticket/Pass $ 35-500
   Date(s) 8/1/17 9/1/17
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   If no: Hollywood Bowl
   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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bernardi Multi-Purpose Senior Center</td>
<td>50</td>
<td>Senior Center</td>
</tr>
</tbody>
</table>

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
   Yolanda Valadez
   Print Name
   Ticket Administrator
   (month, day, year)
   Comment: 25 tickets for each concert date.
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number
   213-974-3333
   E-mail
   yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy?  Yes ☒ No ☐
   Face Value of Each Ticket/Pass $25 - $30
   Event Description: __________________________________________________________________________
   Date(s) 7/16/17 8/24/17
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   If no: ______________________________________________________________________________________
   If yes: Name of Source
   Was ticket distribution made at the behest of agency official? Yes ☒ No ☐
   If yes: ______________________________________________________________________________________

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
      __________________________________________________________________________________________

   B. Name of Individual (Last, First)   Number of Ticket(s)/Passes   Identify one of the following:
      _________________________________________________________________________________________
      Ceremonial Role ☐ Other ☐ Income ☐
      If checking "Ceremonial Role" or "Other" describe below:
      _________________________________________________________________________________________
      Ceremonial Role ☐ Other ☐ Income ☐
      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
      El Cariso Community Regional Park 50

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 Yolanda Valadez Ticket Administrator
   Print Name Title
   (month, day, year)
   Comment: 25 Tickets for each concert date.

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)