Tickets Provided by Agency Report

1. Agency Name
   COUNTY OF LOS ANGELES
   Division, Department, or Region (if applicable)
   BOARD OF SUPERVISORS, 2ND DISTRICT
   Street Address
   500 WEST TEMPLE STREET, LOS ANGELES 90012
   Area Code/Phone Number
   (213) 974-2222
   E-mail
   cindywan@bos.lacounty.gov
   Agency Contact (name and title)
   CINDY WAN, EXECUTIVE ASSISTANT

   Date Stamp
   California Form 802
   For Official Use Only
   Amendment (Must explain in Part 5.)
   Date of Original Filing: ____________
   (month, day, year)

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 09 / 05 / 09
   Description of Event: 2009 LA COUNTY FAIR
   10 / 09
   Face Value of Ticket: $17.00
   Agency Event: ☐ Yes ☐ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency:
   LOS ANGELES COUNTY FAIR ASSOCIATION
   Number of Tickets Received: ____________
   Ticket(s) Provided to Agency: ☐ Gratuitously ☑ Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

   Name of Official (Last, First)
   Number of Tickets
   State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
   RON FISHER
   4
   Promoting public & private facilities available for county resident use

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: ________________________________
   Name of Individual or Organization: ________________________________
   Number of Tickets: ________________________________
   Description of Organization: ________________________________
   Address of Organization: Number and Street
   City ________________________________
   State ________________________________
   Zip Code: ________________________________
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   ________________________________

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.
   Signature of Agency Head or Designee
   CINDY WAN
   Print Name
   EXECUTIVE ASSISTANT
   Title
   09/04/09
   (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
1. **Agency Name**
   - COUNTY OF LOS ANGELES
   - BOARD OF SUPERVISORS, 2ND DISTRICT

2. **Event For Which Tickets Were Distributed**
   - **Date(s) of Event:** 09 / 05 / 09
   - 10 / 04 / 09
   - **Description of Event:** 2009 LA COUNTY FAIR
   - **Face Value of Ticket:** $17.00

3. **Agency Official(s) Receiving Ticket(s)**
   - **Name of Official (Last, First):** FERNANDO RAMIREZ
   - **Number of Tickets:** 4
   - **State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution:**
     - Promoting public & private facilities available for county resident use

4. **Individual or Organization Receiving Ticket(s)**
   - **Name of Behesting Agency Official:**
   - **Name of Individual or Organization:**
   - **Number of Tickets:**
   - **Description of Organization:**
   - **Address of Organization:**
   - **Purpose for Distribution:** (Describe the public purpose for the distribution to the organization.)

5. **Verification**
   - I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.
   - **Signature of Agency Head or Designee:** CINDY WAN
   - **Print Name:** EXECUTIVE ASSISTANT
   - **Title:**
   - **Comment:** (Use this space or an attachment for any additional information including amendment explanation.)
### 1. Agency Name

**COUNTY OF LOS ANGELES**

**Division, Department, or Region (if applicable):**

**BOARD OF SUPERVISORS, 2ND DISTRICT**

**Street Address:**

500 WEST TEMPLE STREET, LOS ANGELES 90012

**Area Code/Phone Number**

(213) 974-2222

**E-mail**

cindywan@bos.lacounty.gov

**Agency Contact (name and title):**

CINDY WAN, EXECUTIVE ASSISTANT

**Date of Original Filing:**

(month, day, year)

### 2. Event For Which Tickets Were Distributed

**Date(s) of Event:**

09/05/09

10/04/09

**Description of Event:**

2009 LA COUNTY FAIR

**Face Value of Ticket:**

$17.00

**Agency Event:**

☐ Yes

☒ No (Identify source of tickets below.)

**Name of Outside Source of Ticket(s) Provided to Agency:**

LOS ANGELES COUNTY FAIR ASSOCIATION

**Number of Tickets Received:**

Ticket(s) Provided to Agency:

☐ Gratuitously

☒ Pursuant to Contract

### 3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>YOLANDA VERAS</td>
<td>4</td>
<td>Promoting public &amp; private facilities available for county resident use</td>
</tr>
</tbody>
</table>

### 4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

**Name of Requesting Agency Official:**

**Name of Individual or Organization:**

**Number of Tickets:**

**Description of Organization:**

**Address of Organization:**

Number and Street

City

State

Zip Code

**Purpose for Distribution:**

(Describe the public purpose for the distribution to the organization.)

### 5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

**Signature of Agency Head or Designee:**

**Print Name:**

CINDY WAN

**Title:**

EXECUTIVE ASSISTANT

**Date:**

09/04/09

(month, day, year)

**Comment:** (Use this space or an attachment for any additional information including amendment explanation.)
## Tickets Provided by Agency Report

### 1. Agency Name
- COUNTY OF LOS ANGELES
- BOARD OF SUPERVISORS, 2ND DISTRICT

**Street Address**
- 500 WEST TEMPLE STREET, LOS ANGELES 90012

**Area Code/Phone Number**
- (213) 974-2222

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

**Agency Contact (name and title)**
- CINDY WAN, EXECUTIVE ASSISTANT

### 2. Event For Which Tickets Were Distributed

**Date(s) of Event:**
- 09 / 05 / 09
- 10 / 04 / 09

**Description of Event:** 2009 LA COUNTY FAIR

**Face Value of Ticket:** $17.00

**Agency Event:**
- ☐ Yes
- ☒ No (Identify source of tickets below.)

**Name of Outside Source of Ticket(s) Provided to Agency:** LOS ANGELES COUNTY FAIR ASSOCIATION

**Number of Tickets Received:**
- __________

**Ticket(s) Provided to Agency:**
- ☐ Gratuitously
- ☒ Pursuant to Contract

### 3. Agency Official(s) Receiving Ticket(s)

(Use a continuation sheet for additional names)

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>RENITA BOWLIN</td>
<td>4</td>
<td>Promoting public &amp; private facilities available for county resident use</td>
</tr>
</tbody>
</table>

### 4. Individual or Organization Receiving Ticket(s)

(Provided at the behest of an agency official.)

**Name of Behothing Agency Official:**

**Name of Individual or Organization:**

**Number of Tickets:**

**Description of Organization:**

**Address of Organization:**
- Number and Street
- City
- State
- Zip Code

**Purpose for Distribution:** (Describe the public purpose for the distribution to the organization.)

### 5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

**Signature of Agency Head or Designee:**
- [Signature]

**Print Name:**
- CINDY WAN

**Title:**
- EXECUTIVE ASSISTANT

**Date:**
- 09/04/09

**Comment:** (Use this space or an attachment for any additional information including amendment explanation.)
1. Agency Name
   COUNTY OF LOS ANGELES
   Division, Department, or Region (if applicable)
   BOARD OF SUPERVISORS, 2ND DISTRICT
   Street Address
   500 WEST TEMPLE STREET, LOS ANGELES 90012
   Area Code/Phone Number (213) 974-2222
   E-mail cindywan@bos.lacounty.gov

   Agency Contact (name and title)
   CINDY WAN, EXECUTIVE ASSISTANT

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 09/05/09
   Description of Event: 2009 LA COUNTY FAIR
   10/04/09
   Face Value of Ticket: $17.00
   Agency Event: ☑ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: LOS ANGELES COUNTY FAIR ASSOCIATION
   Number of Tickets Received: ________
   Ticket(s) Provided to Agency: ☑ Gratuitously ☑ Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>MARY JONES</td>
<td>4</td>
<td>Promoting public &amp; private facilities available for county resident use</td>
</tr>
</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

   Name of Behesting Agency Official: __________________________
   Name of Individual or Organization: __________________________
   Number of Tickets: ________
   Description of Organization: ________________________________
   Address of Organization: __________________________
   Number and Street: __________________
   City: __________________
   State: __________
   Zip Code: ___
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

5. Verification

   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

   Signature of Agency Head or Designee: ______________________
   Print Name: __________________
   EXECUTIVE ASSISTANT
   Title: __________________
   (month, day, year) 09/04/09

   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
**Tickets Provided by Agency Report**

**1. Agency Name**
COUNTY OF LOS ANGELES

**Division, Department, or Region (if applicable)**
BOARD OF SUPERVISORS, 2ND DISTRICT

**Street Address**
500 WEST TEMPLE STREET, LOS ANGELES 90012

**Area Code/Phone Number** (213) 974-2222

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

**Agency Contact (name and title)** CINDY WAN, EXECUTIVE ASSISTANT

**Date Stamp**

**Amendment** (Must explain in Part 5)

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

**2. Event For Which Tickets Were Distributed**

<table>
<thead>
<tr>
<th>Date(s) of Event</th>
<th>Description of Event</th>
<th>Face Value of Ticket</th>
</tr>
</thead>
<tbody>
<tr>
<td>09 / 05 / 09</td>
<td>2009 LA COUNTY FAIR</td>
<td>$17.00</td>
</tr>
<tr>
<td>10 / 04 / 09</td>
<td>10 / 04 / 09</td>
<td></td>
</tr>
</tbody>
</table>

**Agency Event**

- ☐ Yes
- ☒ No (Identify source of tickets below.)

**Name of Outside Source of Ticket(s) Provided to Agency:** LOS ANGELES COUNTY FAIR ASSOCIATION

**Number of Tickets Received:**

**Ticket(s) Provided to Agency:**

- ☐ Gratuitously
- ☒ Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>EARNESTENE WILSON</td>
<td>4</td>
<td>Promoting public &amp; private facilities available for county resident use</td>
</tr>
</tbody>
</table>

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

**Name of Behesting Agency Official:**

**Name of Individual or Organization:**

**Number of Tickets:**

**Description of Organization:**

**Address of Organization:**

**City**

**State**

**Zip Code**

**Purpose for Distribution:** (Describe the public purpose for the distribution to the organization.)

**5. Verification**

_I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1._

**Signature of Agency Head or Designee**

**Print Name**

**Title**

**Date:** 09/04/09

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

---

FPPC Form 802 (Feb/09)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
1. Agency Name
   COUNTY OF LOS ANGELES
   BOARD OF SUPERVISORS, 2ND DISTRICT
   500 WEST TEMPLE STREET, LOS ANGELES 90012
   (213) 974-2222  cindywan@bos.lacounty.gov
   CINDY WAN, EXECUTIVE ASSISTANT

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 09 / 05 / 09  Description of Event: 2009 LA COUNTY FAIR
   10 / 04 / 09  Face Value of Ticket: $ 17.00
   Agency Event: ☐ Yes  ☒ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: LOS ANGELES COUNTY FAIR ASSOCIATION
   Number of Tickets Received:  ___________  Ticket(s) Provided to Agency: ☒ Gratuitously  ☐ Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (Use a continuation sheet for additional names)

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>CATHEY BAQUERO</td>
<td>4</td>
<td>Promoting public &amp; private facilities available for county resident use</td>
</tr>
</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

   Name of Behesting Agency Official: ________________________________
   Name of Individual or Organization: ________________________________
   Number of Tickets: __________________
   Description of Organization: ______________________________________
   Address of Organization: ________________________________________
   Number and Street: __________________  City: __________________ State: ____________  Zip Code: ____________
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   __________________________________________

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.
   Signature of Agency Head or Designee: ____________________________
   Print Name: CINDY WAN  Title: EXECUTIVE ASSISTANT
   (month, day, year) 09/04/09
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
   __________________________________________
1. **Agency Name**
   - COUNTY OF LOS ANGELES
   - BOARD OF SUPERVISORS, 2ND DISTRICT

2. **Event For Which Tickets Were Distributed**
   - **Date(s) of Event:** 09/05/09, 10/04/09
   - **Description of Event:** 2009 LA COUNTY FAIR
   - **Face Value of Ticket:** $17.00

3. **Agency Official(s) Receiving Ticket(s)**
   - | Name of Official | Number of Tickets | State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution |
     |------------------|-------------------|----------------------------------------------------------------------------------|
     | ERIN STENNIS     | 4                 | Promoting public & private facilities available for county resident use          |

4. **Individual or Organization Receiving Ticket(s)**
   - **Name of Behesting Agency Official:**
   - **Name of Individual or Organization:**
   - **Description of Organization:**
   - **Address of Organization:**
     - Number and Street
     - City
     - State
     - Zip Code
   - **Purpose for Distribution:** (Describe the public purpose for the distribution to the organization.)

5. **Verification**
   - I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.
   - **Signature of Agency Head or Designee:**
   - **Print Name:** CINDY WAN
   - **Title:** EXECUTIVE ASSISTANT
   - **Date:** 09/04/09 (month, day, year)
   - **Comment:** (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by Agency Report

1. Agency Name
   COUNTY OF LOS ANGELES
   BOARD OF SUPERVISORS, 2ND DISTRICT
   500 WEST TEMPLE STREET, LOS ANGELES 90012
   Area Code/Phone Number: (213) 974-2222
   E-mail: cindywan@bos.lacounty.gov
   Agency Contact: CINDY WAN, EXECUTIVE ASSISTANT

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 09 / 05 / 09 10 / 04 / 09
   Description of Event: 2009 LA COUNTY FAIR
   Face Value of Ticket: $17.00
   Agency Event: Yes
   Name of Outside Source of Ticket(s) Provided to Agency: LOS ANGELES COUNTY FAIR ASSOCIATION
   Number of Tickets Received: _________
   Ticket(s) Provided to Agency: Gratuitously

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>JIWON HONG</td>
<td>4</td>
<td>Promoting public &amp; private facilities available for county resident use</td>
</tr>
</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official)

   Name of Behesting Agency Official: ____________________________
   Name of Individual or Organization: ____________________________
   Number of Tickets: _________
   Description of Organization: ____________________________
   Address of Organization: Number and Street ____________________________
   City ____________________________ State ____________________________
   Zip Code: __________________
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.
   CINDY WAN, EXECUTIVE ASSISTANT 09/04/09
   Signature of Agency Head or Designee Print Name Title
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by Agency Report

1. Agency Name
   COUNTY OF LOS ANGELES
   Division, Department, or Region (if applicable)
   BOARD OF SUPERVISORS, 2ND DISTRICT
   Street Address
   500 WEST TEMPLE STREET, LOS ANGELES 90012
   Area Code/Phone Number
   (213) 974-2222
   E-mail
   cindywan@bos.lacounty.gov
   Agency Contact (name and title)
   CINDY WAN, EXECUTIVE ASSISTANT

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 09/05/09
   Description of Event: 2009 LA COUNTY FAIR
   10/04/09
   Face Value of Ticket: $17.00
   Agency Event: ☑ Yes  ☐ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency:
   LOS ANGELES COUNTY FAIR ASSOCIATION
   Number of Tickets Received: ________
   Ticket(s) Provided to Agency: ☑ Gratuitously  ☐ Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>RACHEL BARBOSA</td>
<td>4</td>
<td>Promoting public &amp; private facilities available for county resident use</td>
</tr>
</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

   Name of Behesting Agency Official: __________
   Name of Individual or Organization: __________  Number of Tickets: ________
   Description of Organization: __________
   Address of Organization: __________
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.
   CINDY WAN EXECUTIVE ASSISTANT 09/04/09
   (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)

FPPC Form 802 (Feb/09)
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, 2ND DISTRICT  
Street Address  
500 WEST TEMPLE STREET, LOS ANGELES 90012  
Area Code/Phone Number  
(213) 974-2222  
E-mail  
cindywan@bos.lacounty.gov  
Agency Contact (name and title)  
CINDY WAN, EXECUTIVE ASSISTANT  

2. Event For Which Tickets Were Distributed  
Date(s) of Event:  
09 / 05 / 09  
10 / 04 / 09  
Description of Event:  
2009 LA COUNTY FAIR  
Face Value of Ticket: $ 17.00  

Agency Event  
☐ Yes  
☒ No (Identify source of tickets below.)  
Name of Outside Source of Ticket(s) Provided to Agency:  
LOS ANGELES COUNTY FAIR ASSOCIATION  
Number of Tickets Received:  
Ticket(s) Provided to Agency:  
☐ Gratuitously  
☒ Pursuant to Contract  

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)  
<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>JOAN CREAR</td>
<td>4</td>
<td>Promoting public &amp; private facilities available for county resident use</td>
</tr>
</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)  
Name of Behesting Agency Official:  
Name of Individual or Organization:  
Number of Tickets:  
Description of Organization:  
Address of Organization:  
Number and Street  
City  
State  
Zip Code  
Purpose for Distribution:  (Describe the public purpose for the distribution to the organization.)  

5. Verification  
I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.  

☐ Signature of Agency Head or Designee  
☐ Print Name  
☐ Title  
Date: 09/04/09 (month, day, year)  
Comment:  
(Use this space or an attachment for any additional information including amendment explanation.)  

FPPC Form 802 (Feb/09)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
1. Agency Name
   COUNTY OF LOS ANGELES
   BOARD OF SUPERVISORS, 2ND DISTRICT
   500 WEST TEMPLE STREET, LOS ANGELES 90012
   Area Code/Phone Number: (213) 974-2222
   E-mail: cindywan@bos.lacounty.gov
   Agency Contact: CINDY WAN, EXECUTIVE ASSISTANT

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 09 / 05 / 09
   Description of Event: 2009 LA COUNTY FAIR
   Face Value of Ticket: $ 17.00

   Agency Event: No

   Name of Outside Source of Ticket(s) Provided to Agency: LOS ANGELES COUNTY FAIR ASSOCIATION
   Number of Tickets Received: __________
   Ticket(s) Provided to Agency: Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s)

   Name of Official
   Number of Tickets
   State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
   Promoting public & private facilities available for county resident use

4. Individual or Organization Receiving Ticket(s)

   Name of Behesting Agency Official: __________
   Name of Individual or Organization: __________
   Number of Tickets: __________
   Description of Organization: __________
   Address of Organization: __________
   Purpose for Distribution: __________

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.
   Signature of Agency Head or Designee: CINDY WAN
   Print Name: EXECUTIVE ASSISTANT
   Title: 09/04/09
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
# Tickets Provided by Agency Report

## A Public Document

<table>
<thead>
<tr>
<th>1. Agency Name</th>
<th>Date Stamp</th>
</tr>
</thead>
<tbody>
<tr>
<td>COUNTY OF LOS ANGELES</td>
<td>California Form 802</td>
</tr>
<tr>
<td>Division, Department, or Region (if applicable)</td>
<td>For Official Use Only</td>
</tr>
<tr>
<td>BOARD OF SUPERVISORS, 2ND DISTRICT</td>
<td></td>
</tr>
<tr>
<td>Street Address</td>
<td></td>
</tr>
<tr>
<td>500 WEST TEMPLE STREET, LOS ANGELES 90012</td>
<td></td>
</tr>
<tr>
<td>Area Code/Phone Number</td>
<td>E-mail</td>
</tr>
<tr>
<td>(213) 974-2222</td>
<td><a href="mailto:cindywan@bos.lacounty.gov">cindywan@bos.lacounty.gov</a></td>
</tr>
<tr>
<td>Agency Contact (name and title)</td>
<td></td>
</tr>
<tr>
<td>CINDY WAN, EXECUTIVE ASSISTANT</td>
<td></td>
</tr>
</tbody>
</table>

## 2. Event For Which Tickets Were Distributed

<table>
<thead>
<tr>
<th>Date(s) of Event</th>
<th>Description of Event</th>
<th>Face Value of Ticket</th>
</tr>
</thead>
<tbody>
<tr>
<td>09 / 05 / 09</td>
<td>2009 LA COUNTY FAIR</td>
<td>17.00</td>
</tr>
<tr>
<td>10 / 04 / 09</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Agency Event: □ Yes  □ No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: LOS ANGELES COUNTY FAIR ASSOCIATION

Number of Tickets Received: □ Gratuotously  □ Pursuant to Contract

## 3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>MARYLOU CASTELLANO</td>
<td>4</td>
<td>Promoting public &amp; private facilities available for county resident use</td>
</tr>
</tbody>
</table>

## 4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: 

Name of Individual or Organization: 
Number of Tickets: 

Description of Organization: 

Address of Organization: 
Name and Street: 
City: 
State: 
Zip Code: 

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.) 

## 5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

Signature of Agency Head or Designee: CINDY WAN  EXECUTIVE ASSISTANT  09/04/09

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

FPPC Form 802 (Feb/09)
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, 2ND DISTRICT
Street Address
500 WEST TEMPLE STREET, LOS ANGELES 90012
Area Code/Phone Number (213) 974-2222
E-mail cindywan@bos.lacounty.gov
Agency Contact (name and title) CINDY WAN, EXECUTIVE ASSISTANT

2. Event For Which Tickets Were Distributed
Date(s) of Event: 09 / 05 / 09
09 / 10 / 09
Description of Event: 2009 LA COUNTY FAIR
Face Value of Ticket: $ 17.00
Agency Event: ☑ Yes ☐ No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: LOS ANGELES COUNTY FAIR ASSOCIATION
Number of Tickets Received: _________ Ticket(s) Provided to Agency: ☑ Gratuitously ☑ Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)
Name of Official (Last, First) Number of Tickets State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
JACQUELINE MARTIN 4 Promoting public & private facilities available for county resident use

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
Name of Behesting Agency Official: __________________________
Name of Individual or Organization: __________________________ Number of Tickets: _________
Description of Organization: __________________________
Address of Organization: Number and Street __________________________ City __________________________ State __________________________ Zip Code __________________________
Purpose for Distribution: (Describe the public purpose for the distribution to the organization.) __________________________

5. Verification
I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

Signature of Agency Head or Designee CINDY WAN EXECUTIVE ASSISTANT 09/04/09
Print Name
Title (month, day, year)

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

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
**Tickets Provided by Agency Report**

**A Public Document**

1. **Agency Name**
   - COUNTY OF LOS ANGELES
   - BOARD OF SUPERVISORS, 2ND DISTRICT
   - Street Address: 500 WEST TEMPLE STREET, LOS ANGELES 90012

2. **Event For Which Tickets Were Distributed**
   - Date(s) of Event: 09/05/09, 10/04/09
   - Description of Event: 2009 LA COUNTY FAIR
   - Face Value of Ticket: $17.00
   - Agency Event: [X] No
   - Name of Outside Source of Ticket(s) Provided to Agency: LOS ANGELES COUNTY FAIR ASSOCIATION
   - Number of Tickets Received: ________
   - Ticket(s) Provided to Agency: [X] Pursuant to Contract

3. **Agency Official(s) Receiving Ticket(s)**
   - Name of Official: JACQUELINE MARTINEZ
   - Number of Tickets: 4
   - State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution:
     - Promoting public & private facilities available for county resident use

4. **Individual or Organization Receiving Ticket(s)**
   - Name of Behesting Agency Official: ___________________________
   - Name of Individual or Organization: ___________________________
   - Number of Tickets: ________
   - Description of Organization: ___________________________
   - Address of Organization: ___________________________
   - Purpose for Distribution: (Describe the public purpose for the distribution to the organization.) ___________________________

5. **Verification**
   - I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

   **Signature:** [Signature]
   **Print Name:** CINDY WAN
   **Title:** EXECUTIVE ASSISTANT
   **Date:** 09/04/09

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

FPPC Form 802 (Feb/09)
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, 2ND DISTRICT
Street Address
500 WEST TEMPLE STREET, LOS ANGELES 90012
Area Code/Phone Number (213) 974-2222
E-mail cindywan@bos.lacounty.gov
Agency Contact Name and Title CINDY WAN, EXECUTIVE ASSISTANT

2. Event For Which Tickets Were Distributed
Date(s) of Event: 09 / 05 / 09 Description of Event: 2009 LA COUNTY FAIR
10 / 04 / 09 Face Value of Ticket: $ 17.00
Agency Event Yes No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: LOS ANGELES COUNTY FAIR ASSOCIATION
Number of Tickets Received: _____ Ticket(s) Provided to Agency: No Gratuitously Yes Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>MARIA CERDAS</td>
<td>4</td>
<td>Promoting public &amp; private facilities available for county resident use</td>
</tr>
</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: __________________________
Name of Individual or Organization: __________________________ Number of Tickets: _________
Description of Organization: ________________________________
Address of Organization: Number and Street ____________ City State Zip Code
Purpose for Distribution: (Describe the public purpose for the distribution to the organization.) __________________________

5. Verification
I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

Signature of Agency Head or Designee: CINDY WAN
Print Name EXECUTIVE ASSISTANT
Title: 09/04/09 (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by
Agency Report

A Public Document

1. Agency Name
   COUNTY OF LOS ANGELES
   Division, Department, or Region (if applicable)
   BOARD OF SUPERVISORS, 2ND DISTRICT
   Street Address
   500 WEST TEMPLE STREET, LOS ANGELES 90012
   Area Code/Phone Number
   (213) 974-2222
   E-mail
cindywan@bos.lacounty.gov
   Agency Contact (name and title)
   CINDY WAN, EXECUTIVE ASSISTANT
   Date Stamp
   Amendment (Must explain in Part 5.)
   Date of Original Filing: _______ (month, day, year)

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 09 / 05 / 09
   Description of Event: 2009 LA COUNTY FAIR
   10 / 04 / 09
   Face Value of Ticket: $17.00
   Agency Event: ☐ Yes ☒ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency:
   LOS ANGELES COUNTY FAIR ASSOCIATION
   Number of Tickets Received: _______
   Ticket(s) Provided to Agency: ☐ Gratuitously ☒ Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (Use a continuation sheet for additional names)

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>ALAN BRESLAUER</td>
<td>4</td>
<td>Promoting public &amp; private facilities available for county resident use</td>
</tr>
</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

   Name of Behesting Agency Official: ________________________________________________________________________________
   Name of Individual or Organization: ________________________________________________________________________________
   Number of Tickets: _____________________________________________________________________________________________
   Description of Organization: ____________________________________________________________________________________
   Address of Organization: ________________________________________________________________________________________
   Number and Street: ____________________________________________________________________________________________
   City: _______________________________________________________________________________________________________
   State: _____________________________________________________________________________________________________
   Zip Code: ________________________________________________________________________________________________
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   ________________________________________________________________________________________________________________________________________________________________

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

   Signature of Agency Head or Designee: ____________
   Print Name: CINDY WAN
   TITLE: EXECUTIVE ASSISTANT
   Date: 09/04/09 (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)

FPPC Form 892 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
# Tickets Provided by Agency Report

## 1. Agency Name

**COUNTY OF LOS ANGELES**

**BOARD OF SUPERVISORS, 2ND DISTRICT**

**500 WEST TEMPLE STREET, LOS ANGELES 90012**

**CINDY WAN, EXECUTIVE ASSISTANT**

## 2. Event For Which Tickets Were Distributed

<table>
<thead>
<tr>
<th>Date(s) of Event</th>
<th>Description of Event</th>
<th>Face Value of Ticket</th>
</tr>
</thead>
<tbody>
<tr>
<td>09 / 05 / 09</td>
<td>2009 LA COUNTY FAIR</td>
<td>$17.00</td>
</tr>
<tr>
<td>10 / 04 / 09</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Agency Event** □ Yes  □ No (Identify source of tickets below.)

**Name of Outside Source of Ticket(s) Provided to Agency:** LOS ANGELES COUNTY FAIR ASSOCIATION

**Number of Tickets Received:** __________ **Ticket(s) Provided to Agency:** □ Gratuitously  □ Pursuant to Contract

## 3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>DARYL LUCIEN</td>
<td>4</td>
<td>Promoting public &amp; private facilities available for county resident use</td>
</tr>
</tbody>
</table>

## 4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

**Name of Behesting Agency Official:**

**Name of Individual or Organization:**

**Number of Tickets:**

**Description of Organization:**

**Address of Organization:**

**Purpose for Distribution:** (Describe the public purpose for the distribution to the organization.)

## 5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

**Signature of Agency Head or Designee:**

CINDY WAN  EXECUTIVE ASSISTANT  09/04/09

**Comment:** (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by
Agency Name
COUNTY OF LOS ANGELES
Division, Department, or Region (if applicable)
BOARD OF SUPERVISORS, 2ND DISTRICT
Street Address
500 WEST TEMPLE STREET, LOS ANGELES 90012
Area Code/Phone Number
(213) 974-2222
E-mail
cindywan@bos.lacounty.gov
Agency Contact (name and title)
CINDY WAN, EXECUTIVE ASSISTANT

2. Event For Which Tickets Were Distributed

<table>
<thead>
<tr>
<th>Date(s) of Event</th>
<th>Description of Event</th>
<th>Face Value of Ticket</th>
</tr>
</thead>
<tbody>
<tr>
<td>09/05/09</td>
<td>2009 LA COUNTY FAIR</td>
<td>$17.00</td>
</tr>
<tr>
<td>10/04/09</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Agency Event □ Yes  □ No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency:
LOS ANGELES COUNTY FAIR ASSOCIATION

Number of Tickets Received: ________
Ticket(s) Provided to Agency: □ Gratuitously  □ Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
</tr>
</thead>
<tbody>
<tr>
<td>JAMES BOLDEN</td>
<td>4</td>
</tr>
</tbody>
</table>

State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Promoting public & private facilities available for county resident use

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: ______________
Name of Individual or Organization: __________________ Number of Tickets: ________
Description of Organization: ____________________________
Address of Organization: Number and Street __________________ City State Zip Code
Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

5. Verification
I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

Signature of Agency Head or Designee
CINDY WAN
Print Name
EXECUTIVE ASSISTANT
Title
09/04/09 (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by Agency Report  
A Public Document

1. Agency Name  
COUNTY OF LOS ANGELES  
Division, Department, or Region (if applicable)  
BOARD OF SUPERVISORS, 2ND DISTRICT  
Street Address  
500 WEST TEMPLE STREET, LOS ANGELES 90012  
Area Code/Phone Number  E-mail  
(213) 674-2222  cindywan@bos.lacounty.gov  
Agency Contact (name and title)  
CINDY WAN, EXECUTIVE ASSISTANT  

2. Event For Which Tickets Were Distributed  
Date(s) of Event:  
09 / 05 / 09  10 / 04 / 09  
Description of Event: 2009 LA COUNTY FAIR  
Face Value of Ticket: $17.00  
Agency Event ☐ Yes  ☒ No (Identify source of tickets below.)  
Name of Outside Source of Ticket(s) Provided to Agency: LOS ANGELES COUNTY FAIR ASSOCIATION  
Number of Tickets Received:  
Ticket(s) Provided to Agency: ☐ Gratuitously  ☒ Pursuant to Contract  

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)  

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>COURTNEY WILKINS</td>
<td>4</td>
<td>Promoting public &amp; private facilities available for county resident use</td>
</tr>
</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)  
Name of Behesting Agency Official:  
Name of Individual or Organization:  
Number of Tickets:  
Description of Organization:  
Address of Organization:  
Number and Street:  
City:  
State:  
Zip Code:  
Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)  

5. Verification  
I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.  

[Signature of Agency Head or Designee]  
CINDY WAN  
EXECUTIVE ASSISTANT  
09/04/09  
(month, day, year)  
Comment: (Use this space or an attachment for any additional information including amendment explanation.)

FPPC Form 802 (Feb/09)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
1. Agency Name
   COUNTY OF LOS ANGELES
   BOARD OF SUPERVISORS, 2ND DISTRICT
   500 WEST TEMPLE STREET, LOS ANGELES 90012
   (213) 974-2222  cindywan@bos.lacounty.gov
   CINDY WAN, EXECUTIVE ASSISTANT

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 09 / 05 / 09
   Description of Event: 2009 LA COUNTY FAIR
   10 / 04 / 09
   Face Value of Ticket: $17.00
   Yes  No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: LOS ANGELES COUNTY FAIR ASSOCIATION
   Number of Tickets Received:
   Ticket(s) Provided to Agency:  Gratuities  Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

   Name of Official (Last, First)  Number of Tickets  State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
   RICHARD FAJARDO  4  Promoting public & private facilities available for county resident use

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Requesting Agency Official:
   Name of Individual or Organization:  Number of Tickets:
   Description of Organization:
   Address of Organization: Number and Street  Cty  State  Zip Code
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1
   CINDY WAN  EXECUTIVE ASSISTANT  09/04/09
   (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
**Tickets Provided by Agency Report**

1. **Agency Name**
   COUNTY OF LOS ANGELES
   BOARD OF SUPERVISORS, 2ND DISTRICT

2. **Event For Which Tickets Were Distributed**
   - **Date(s) of Event:** 09 / 05 / 09
   - **Description of Event:** 2009 LA COUNTY FAIR
   - **Face Value of Ticket:** $17.00
   - **Agency Event:** ☑ Yes
   - **No** (Identify source of tickets below.)
   - **Name of Outside Source of Ticket(s) Provided to Agency:** LOS ANGELES COUNTY FAIR ASSOCIATION
   - **Number of Tickets Received:**
   - **Ticket(s) Provided to Agency:** ☑ Gratuitously
   - **Pursuant to Contract**

3. **Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>LINDA SMITH</td>
<td>4</td>
<td>Promoting public &amp; private facilities available for county resident use</td>
</tr>
</tbody>
</table>

4. **Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

<table>
<thead>
<tr>
<th>Name of Behesting Agency Official:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name of Individual or Organization:</td>
</tr>
<tr>
<td>Description of Organization:</td>
</tr>
<tr>
<td>Address of Organization:</td>
</tr>
<tr>
<td>Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)</td>
</tr>
</tbody>
</table>

5. **Verification**

   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 19944.1.

   Signature of Agency Head or Designee: CINDY WAN
   Print Name: EXECUTIVE ASSISTANT
   Title: 09/04/09
   (month, day, year)

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

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
**Tickets Provided by**

**Agency Report**

**A Public Document**

1. **Agency Name**
   - COUNTY OF LOS ANGELES
   - Division, Department, or Region (if applicable)
   - BOARD OF SUPERVISORS, 2ND DISTRICT
   - Street Address
   - 500 WEST TEMPLE STREET, LOS ANGELES 90012
   - Area Code/Phone Number: (213) 974-2222
   - E-mail: cindywan@bos.lacounty.gov
   - Agency Contact (name and title): CINDY WAN, EXECUTIVE ASSISTANT

   □ Amendment (Must explain in Part 5.)
   
   Date of Original Filing: (month, day, year)

2. **Event For Which Tickets Were Distributed**
   - Date(s) of Event: 09 / 05 / 09
   - Description of Event: 2009 LA COUNTY FAIR
   - Face Value of Ticket: $17.00
   - Agency Event:  □ Yes  □ No (Identify source of tickets below.)

   Name of Outside Source of Ticket(s) Provided to Agency: LOS ANGELES COUNTY FAIR ASSOCIATION

   Number of Tickets Received: _________  Ticket(s) Provided to Agency:  □ Gratuitously  □ Pursuant to Contract

3. **Agency Official(s) Receiving Ticket(s)** (Use a continuation sheet for additional names)

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>SALYA MOHAMEDY</td>
<td>4</td>
<td>Promoting public &amp; private facilities available for county resident use</td>
</tr>
</tbody>
</table>

4. **Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

   Name of Behesting Agency Official: ________________________________

   Name of Individual or Organization: ________________________________
   Number of Tickets: _________

   Description of Organization: ________________________________

   Address of Organization: _______________________________________
   Number and Street City State Zip Code

   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

   __________________________________________________________________________

5. **Verification**

   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

   Signature of Agency Head or Designee: ____________________________
   Print Name: CINDY WAN
   Title: EXECUTIVE ASSISTANT
   Date: 09/04/09 (month, day, year)

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

---

FPPC Form 802 (Feb/09)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Tickets Provided by Agency Report

1. Agency Name
COUNTY OF LOS ANGELES

Division, Department, or Region (if applicable):
BOARD OF SUPERVISORS, 2ND DISTRICT

Street Address
500 WEST TEMPLE STREET, LOS ANGELES 90012

Area Code/Phone Number (213) 974-2222
E-mail cindywan@bos.lacounty.gov

Agency Contact (name and title) CINDY WAN, EXECUTIVE ASSISTANT

Date Stamp California Form 802
For Official Use Only

2. Event For Which Tickets Were Distributed

Date(s) of Event: 09 / 05 / 09 Description of Event: 2009 LA COUNTY FAIR

10 / 04 / 09 Face Value of Ticket: $17.00

Agency Event □ Yes □ No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: LOS ANGELES COUNTY FAIR ASSOCIATION

Number of Tickets Received: _________ Ticket(s) Provided to Agency: □ Gratuitously □ Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>MELISSA HERNANDEZ</td>
<td>4</td>
<td>Promoting public &amp; private facilities available for county resident use</td>
</tr>
</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official)

Name of Behesting Agency Official: ____________________________

Name of Individual or Organization: ____________________________ Number of Tickets: _________

Description of Organization: ____________________________

Address of Organization: Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1:

Signature of Agency Head or Designee CINDY WAN EXECUTIVE ASSISTANT 09/04/09

Print Name Title (month, day, year)

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

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
**Tickets Provided by Agency Report**

**A Public Document**

1. **Agency Name**
   - COUNTY OF LOS ANGELES
   - BOARD OF SUPERVISORS, 2ND DISTRICT

2. **Event For Which Tickets Were Distributed**
   - **Date(s) of Event:** 09/05/09 10/04/09
   - **Description of Event:** 2009 LA COUNTY FAIR
   - **Face Value of Ticket:** $17.00

3. **Agency Official(s) Receiving Ticket(s)**
   - **Name of Official**
     - JOSIE RAMIREZ
   - **Number of Tickets:** 4
   - **State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution:**
     - Promoting public & private facilities available for county resident use

4. **Individual or Organization Receiving Ticket(s)**
   - **Name of Behesting Agency Official:**
   - **Name of Individual or Organization:**
   - **Number of Tickets:**
   - **Description of Organization:**
   - **Address of Organization:**
     - Number and Street
     - City
     - State
     - Zip Code
   - **Purpose for Distribution:**
     - (Describe the public purpose for the distribution to the organization.)

5. **Verification**
   - **I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 19444.1.**
   - **Signature of Agency Head or Designee:** CINDY WAN
   - **Print Name:** EXECUTIVE ASSISTANT
   - **Title:** 09/04/09
   - **(month, day, year)**

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

---

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Tickets Provided by Agency Report

**1. Agency Name**
COUNTY OF LOS ANGELES
Division, Department, or Region (if applicable)
BOARD OF SUPERVISORS, 2ND DISTRICT
Street Address
500 WEST TEMPLE STREET, LOS ANGELES 90012
Area Code/Phone Number E-mail
(213) 974-2222 cindywan@bos.lacounty.gov
Agency Contact (name and title)
CINDY WAN, EXECUTIVE ASSISTANT

**2. Event For Which Tickets Were Distributed**
Date(s) of Event: 09 / 05 / 09 Description of Event: 2009 LA COUNTY FAIR
10 / 04 / 09 Face Value of Ticket: $ 17.00
Agency Event: Yes No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: LOS ANGELES COUNTY FAIR ASSOCIATION
Number of Tickets Received: Ticket(s) Provided to Agency: Gratuitously Yes Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)**

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>CELICA QUINONES</td>
<td>4</td>
<td>Promoting public &amp; private facilities available for county resident use</td>
</tr>
</tbody>
</table>

**4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)**

Name of Behesting Agency Official: 
Name of Individual or Organization: ___________________________ Number of Tickets: ________
Description of Organization: ___________________________________________________________
Address of Organization: Number and Street City State Zip Code
Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

**5. Verification**
I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1

CINDY WAN EXECUTIVE ASSISTANT 09/04/09
Signature of Agency Head or Designee Print Name Title (month, day, year)
Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by Agency Report

1. Agency Name
COUNTY OF LOS ANGELES
Division, Department, or Region (if applicable)
BOARD OF SUPERVISORS, 2ND DISTRICT
Street Address
500 WEST TEMPLE STREET, LOS ANGELES 90012
Area Code/Phone Number E-mail
(213) 974-2222 cindywan@bos.lacounty.gov
Agency Contact (name and title)
CINDY WAN, EXECUTIVE ASSISTANT

2. Event For Which Tickets Were Distributed
Date(s) of Event: 09 / 05 / 09 Description of Event: 2009 LA COUNTY FAIR
10 / 04 / 09 Face Value of Ticket: $ 17.00
Agency Event: □ Yes □ No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: LOS ANGELES COUNTY FAIR ASSOCIATION
Number of Tickets Received: Ticket(s) Provided to Agency: □ Gratuitously □ Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>PATRICIA BECERRA</td>
<td>4</td>
<td>Promoting public &amp; private facilities available for county resident use</td>
</tr>
</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official:

Name of Individual or Organization: Number of Tickets:

Description of Organization:

Address of Organization: Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

Signature of Agency Head or Designee CINDY WAN Print Name EXECUTIVE ASSISTANT Title
09/04/09 (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
# Tickets Provided by Agency Report

**1. Agency Name**

COUNTY OF LOS ANGELES  
Division, Department, or Region (if applicable)  
BOARD OF SUPERVISORS, 2ND DISTRICT  
Street Address  
500 WEST TEMPLE STREET, LOS ANGELES 90012

**Area Code/Phone Number**  
(213) 974-2222  
**E-mail**  
cindywan@bos.lacounty.gov  
**Agency Contact (name and title)**  
CINDY WAN, EXECUTIVE ASSISTANT

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 09/05/09  
10/04/09  
**Description of Event:** 2009 LA COUNTY FAIR  
**Face Value of Ticket:** $17.00

Agency Event: Yes  
No (Identify source of tickets below.)  
**Name of Outside Source of Ticket(s) Provided to Agency:**  
LOS ANGELES COUNTY FAIR ASSOCIATION

**Number of Tickets Received:**  
Ticket(s) Provided to Agency: Gratuitously  
Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)**  
(use a continuation sheet for additional names)

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>KATHLEEN AUSTRIA</td>
<td>4</td>
<td>Promoting public &amp; private facilities available for county resident use</td>
</tr>
</tbody>
</table>

**4. Individual or Organization Receiving Ticket(s)**  
(Provided at the behest of an agency official.)

**Name of Behesting Agency Official:**

**Name of Individual or Organization:**

**Number of Tickets:**

**Description of Organization:**

**Address of Organization:**

**City:**

**State:**

**Zip Code:**

**Purpose for Distribution:**  
(Describe the public purpose for the distribution to the organization.)

---

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

**Signature of Agency Head or Designee:**

CINDY WAN  
EXECUTIVE ASSISTANT  
09/04/09 (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
1. **Agency Name**
   - COUNTY OF LOS ANGELES
   - BOARD OF SUPERVISOR, 2ND DISTRICT

2. **Event For Which Tickets Were Distributed**
   - **Date(s) of Event**: 09 / 05 / 09
   - **Description of Event**: LA COUNTY FAIR
   - **Face Value of Ticket**: $17.00

3. **Agency Official(s) Receiving Ticket(s)**
   - **Name of Official**
     - Supervisor Mark Ridley-Thomas
   - **Number of Tickets**: 4
   - **State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution**
     - **Purpose**: Supporting & showing appreciation for community services.

4. **Individual or Organization Receiving Ticket(s)**
   - **Name of Behesting Agency Official**: Supervisor Mark Ridley-Thomas
   - **Name of Individual or Organization**: CA Community Empowerment Foundation
   - **Number of Tickets**: 4
   - **Description of Organization**: Community Liaison/Organizer
   - **Address of Organization**: 2202 S. Figueroa Street, Suite 628, Los Angeles, CA 90007
   - **Purpose for Distribution**: Supporting & showing appreciation for community services.

5. **Verification**
   - **Signature of Agency Head or Designee**: Cindy Wan
   - **Print Name**: Cindy Wan
   - **Title**: Executive Assistant
   - **Date**: 09/02/09 (month, day, year)

---

**Comment**: (Use this space or an attachment for any additional information including amendment explanation.)
**Tickets Provided by Agency Report**

**1. Agency Name**
COUNTY OF LOS ANGELES
BOARD OF SUPERVISOR, 2ND DISTRICT
500 WEST TEMPLE STREET, LOS ANGELES 90012

**2. Event For Which Tickets Were Distributed**
Date(s) of Event: 09 / 05 / 09
Description of Event: LA COUNTY FAIR
10 / 04 / 09
Face Value of Ticket: $17.00

**3. Agency Official(s) Receiving Ticket(s)**

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<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
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</tr>
</tbody>
</table>

**4. Individual or Organization Receiving Ticket(s)**

Name of Behesting Agency Official: SUPERVISOR MARK RIDLEY-THOMAS
Name of Individual or Organization: Baldwin Village Community in Action
Number of Tickets: 25

Address of Organization: 400 LA BREA, LOS ANGELES, CA 90016

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
Supporting & showing appreciation for community services that benefit County residents.

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

CINDY WAN
EXECUTIVE ASSISTANT
09/02/09

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
## Tickets Provided by Agency Report

**1. Agency Name**
COUNTY OF LOS ANGELES

**Division, Department, or Region (if applicable)**
BOARD OF SUPERVISOR, 2ND DISTRICT

**Street Address**
500 WEST TEMPLE STREET, LOS ANGELES 90012

**Area Code/Phone Number**
(213) 974-2222

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

**Agency Contact (name and title)**
CINDY WAN, EXECUTIVE ASSISTANT

**Date Stamp**

**California Form 802**
For Official Use Only

**2. Event For Which Tickets Were Distributed**

**Date(s) of Event:**
09 / 05 / 09

**Description of Event:** LA COUNTY FAIR

**10 / 04 / 09**

**Face Value of Ticket:** $17.00

**Agency Event**
☐ Yes  ☒ No (Identify source of tickets below.)

**Name of Outside Source of Ticket(s) Provided to Agency:** LOS ANGELES COUNTY FAIR ASSOCIATION

**Number of Tickets Received:**

**Ticket(s) Provided to Agency:**
☐ Gratuitously  ☒ Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

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<th>Name of Official (Last, First)</th>
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</tbody>
</table>

**4. Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

**Name of Behesting Agency Official:** SUPERVISOR MARK RIDLEY-THOMAS

**Name of Individual or Organization:** HerShe Group

**Number of Tickets:** 20

**Description of Organization:** Mentoring organization for girls in foster care

**Address of Organization:**
2390 Crenshaw Blvd., #131, Torrance, CA 90501

**Purpose for Distribution:** (Describe the public purpose for the distribution to the organization.)
Supporting & showing appreciation for community services and youth program

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

**Signature of Agency Head or Designee**
CINDY WAN

**Print Name**
EXECUTIVE ASSISTANT

**Title**
09/02/09

(month, day, year)

**Comment:** (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by Agency Report

1. Agency Name
   COUNTY OF LOS ANGELES
   BOARD OF SUPERVISOR, 2ND DISTRICT

   Street Address
   500 WEST TEMPLE STREET, LOS ANGELES 90012

   Area Code/Phone Number: (213) 974-2222
   E-mail: cindywan@bos.lacounty.gov

   Agency Contact (name and title):
   CINDY WAN, EXECUTIVE ASSISTANT

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 09/05/09 10/04/09
   Description of Event: LA COUNTY FAIR
   Face Value of Ticket: $17.00

   Agency Event: 
   Name of Outside Source of Ticket(s) Provided to Agency: LOS ANGELES COUNTY FAIR ASSOCIATION

   Number of Tickets Received: 
   Ticket(s) Provided to Agency: 

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

   Name of Official (Last, First)
   Number of Tickets
   State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

   Name of Behesting Agency Official: SUPERVISOR MARK RIDLEY-THOMAS

   Name of Individual or Organization: CRENshaw YOUTH CENTER
   Number of Tickets:
   Description of Organization:

   Address of Organization: 4411 11TH AVENUE, SUITE 209, LOS ANGELES, CA. 90043
   Number and Street
   City
   State
   Zip Code

   Purpose for Distribution: SUPPORT AND SHOW APPRECIATION FOR YOUTH PROGRAMS

5. Verification

   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 19944.1.

   Signature of Agency Head or Designee: CINDY WAN
   Print Name: EXECUTIVE ASSISTANT
   Title: 09/02/09
   (month, day, year)

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

   FPPC Form 802 (Feb/09)
   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 SUPERVISOR, 2ND DISTRICT

   Street Address
   500 WEST TEMPLE STREET, LOS ANGELES 90012

   Area Code/Phone Number
   (213) 974-2222
   E-mail
   cindywan@bos.lacounty.gov
   Agency Contact (name and title)
   CINDY WAN, EXECUTIVE ASSISTANT

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 09 / 05 / 09
   Description of Event: LA COUNTY FAIR
   10 / 04 / 09
   Face Value of Ticket: $17.00

   Agency Event: ☐ Yes  ☑ No (Identify source of tickets below.)

   Name of Outside Source of Ticket(s) Provided to Agency: LOS ANGELES COUNTY FAIR ASSOCIATION

   Number of Tickets Received: __________
   Ticket(s) Provided to Agency: ☐ Gratuitously  ☑ Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

   Name of Official
   (Last, First)

   Number of Tickets

   State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

   Name of Behesting Agency Official: SUPERVISOR MARK RIDLEY-THOMAS

   Name of Individual or Organization: FLO-FIRE COMMUNITY LEADERS

   Number of Tickets: __________

   Description of Organization: Community Liaison/Organizer

   Address of Organization: 7901 SOUTH COMPTON AVENUE, LOS ANGELES, CA 90001

   Number and Street
   City
   State
   Zip Code

   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   Supporting & showing appreciation for community services that benefit County residents.

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 19944.1.

   Signature of Agency Head or Designee
   CINDY WAN
   Print Name
   EXECUTIVE ASSISTANT
   Title

   Date of Filing: 09/02/09
   (month, day, year)

   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
## Tickets Provided by Agency Report

### 1. Agency Name
COUNTY OF LOS ANGELES
BOARD OF SUPERVISOR, 2ND DISTRICT
500 WEST TEMPLE STREET, LOS ANGELES 90012

### 2. Event For Which Tickets Were Distributed

<table>
<thead>
<tr>
<th>Date(s) of Event</th>
<th>Description of Event</th>
<th>Face Value of Ticket</th>
</tr>
</thead>
<tbody>
<tr>
<td>09 / 05 / 09</td>
<td>LA COUNTY FAIR</td>
<td>$17.00</td>
</tr>
<tr>
<td>10 / 04 / 09</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Agency Event: □ Yes  □ No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: LOS ANGELES COUNTY FAIR ASSOCIATION

Number of Tickets Received: _________  Ticket(s) Provided to Agency: □ Gratuitously  □ Pursuant to Contract

### 3. Agency Official(s) Receiving Ticket(s)

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
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<tr>
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<td></td>
</tr>
</tbody>
</table>

### 4. Individual or Organization Receiving Ticket(s)

Name of Behesting Agency Official: SUPERVISOR MARK RIDLEY-THOMAS

Name of Individual or Organization: FREDERICK K.C. PRICE SCHOOL

Number of Tickets: 20

Description of Organization: K-12 SCHOOL

Address of Organization: 7901 SOUTH VERMONT AVENUE, LOS ANGELES, CA 90044

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
Supporting & showing appreciation for community services and youth programs.

### 5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

Signature of Agency Head or Designee: CINDY WAN
Print Name: EXECUTIVE ASSISTANT
Title: 09/02/09 (month, day, year)

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

FPPC Form 802 (Feb/09)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Tickets Provided by Agency Report

1. Agency Name
   COUNTY OF LOS ANGELES
   BOARD OF SUPERVISOR, 2ND DISTRICT
   500 WEST TEMPLE STREET, LOS ANGELES 90012
   (213) 974-2222  cindywan@bos.lacounty.gov
   CINDY WAN, EXECUTIVE ASSISTANT

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 09/05/09  10/04/09
   Description of Event: LA COUNTY FAIR
   Face Value of Ticket: $17.00
   Agency Event: ☑ Yes  ☐ No
   Name of Outside Source of Ticket(s) Provided to Agency: LOS ANGELES COUNTY FAIR ASSOCIATION
   Number of Tickets Received: __________
   Ticket(s) Provided to Agency: ☑ Gratuitously  ☑ Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or State the Public Purpose for the Distribution</th>
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<tbody>
<tr>
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</tr>
</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

   Name of Behesting Agency Official: SUPERVISOR MARK RIDLEY-THOMAS
   Name of Individual or Organization: HIS SHELTERING ARMS
   Number of Tickets: 40
   Description of Organization: PROVIDE SERVICES TO MENTAL & SUBSTANCE ABUSE PATIENTS
   Address of Organization: 11101 SOUTH MAIN STREET, LOS ANGELES, CA 90061
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   Supporting & showing appreciation for the community programs & services that benefit County residents.

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

   Signature of Agency Head or Designee: CINDY WAN
   Print Name: EXECUTIVE ASSISTANT
   Title: 09/02/09 (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by Agency Report

1. Agency Name
   COUNTY OF LOS ANGELES
   Division, Department, or Region (if applicable)
   BOARD OF SUPERVISOR, 2ND DISTRICT
   Street Address
   500 WEST TEMPLE STREET, LOS ANGELES 90012
   Area Code/Phone Number E-mail
   (213) 974-2222 cindywan@bos.lacounty.gov
   Agency Contact (name and title)
   CINDY WAN, EXECUTIVE ASSISTANT

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 09 / 05 / 09
   Description of Event: LA COUNTY FAIR
   10 / 04 / 09
   Face Value of Ticket: $ 17.00
   Agency Event □ Yes ☒ No (Identify source of tickets below.)

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
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</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

   Name of Behesting Agency Official: SUPERVISOR MARK RIDLEY-THOMAS
   Name of Individual or Organization: MIRACLE WORKERS SENIOR CITIZENS CLB
   Number of Tickets: 25
   Description of Organization: SENIOR CENTER
   Address of Organization: 5720 2ND AVENUE, LOS ANGELES, CA 90062
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   Supporting & showing appreciation for community programs & services that benefit County residents.

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1

   Signature of Agency Head or Designee: CINDY WAN
   Print Name: EXECUTIVE ASSISTANT
   Title: 09/02/09
   (month, day, year)

   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by Agency Report

1. Agency Name
   COUNTY OF LOS ANGELES
   Division, Department, or Region (if applicable)
   BOARD OF SUPERVISOR, 2ND DISTRICT

   Street Address
   500 WEST TEMPLE STREET, LOS ANGELES 90012

   Area Code/Phone Number      E-mail
   (213) 974-2222               cindywan@bos.lacounty.gov

   Agency Contact (name and title)
   CINDY WAN, EXECUTIVE ASSISTANT

   Date Stamp: 
   California Form 802
   For Official Use Only

2. Event For Which Tickets Were Distributed

   Date(s) of Event: 09 / 05 / 09  Description of Event: LA COUNTY FAIR
   10 / 04 / 09  Face Value of Ticket: $ 17.00

   Agency Event  □ Yes  □ No (Identify source of tickets below.)

   Name of Outside Source of Ticket(s) Provided to Agency: LOS ANGELES COUNTY FAIR ASSOCIATION

   Number of Tickets Received: _______  Ticket(s) Provided to Agency: □ Gratuitously  □ Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

   Name of Official (Last, First)  Number of Tickets  State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

   ______________________________  ______________________________  ______________________________

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

   Name of Behesting Agency Official: SUPERVISOR MARK RIDLEY-THOMAS

   Name of Individual or Organization: SOUTHERN AREA YOUTH PROGRAMS  Number of Tickets: 20

   Description of Organization: YOUTH GOLF PROGRAM

   Address of Organization: 1921 WEST 98TH STREET, LOS ANGELES, CA 90047

   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   Supporting & showing appreciation for community services and youth programs.

5. Verification

   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

   Signature of Agency Head or Designee  Print Name  EXECUTIVE ASSISTANT  Title
   CINDY WAN  09/02/09  (month, day, year)

   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
**1. Agency Name**
COUNTY OF LOS ANGELES
BOARD OF SUPERVISOR, 2ND DISTRICT
500 WEST TEMPLE STREET, LOS ANGELES 90012
E-mail: cindywan@bos.lacounty.gov
AGENCY CONTACT: CINDY WAN, EXECUTIVE ASSISTANT

**2. Event For Which Tickets Were Distributed**
Date(s) of Event: 09 / 05 / 09, 10 / 04 / 09
Description of Event: LA COUNTY FAIR
Face Value of Ticket: $ 17.00
Agency Event: ☑ Yes ☐ No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: LOS ANGELES COUNTY FAIR ASSOCIATION
Number of Tickets Received: 100
Ticket(s) Provided to Agency: ☑ Gratuitously ☑ Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)**
(use a continuation sheet for additional names)

<table>
<thead>
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**4. Individual or Organization Receiving Ticket(s)**
(Provided at the behest of an agency official.)
Name of Behesting Agency Official: SUPERVISOR MARK RIDLEY-THOMAS
Name of Individual or Organization: SPECIAL NEEDS NETWORK
Number of Tickets: 20
Description of Organization: ADVOCATE GROUP FOR FAMILIES WITH DISABILITIES
Address of Organization: 3530 WILSHIRE BLVD, SUITE 1650, LOS ANGELES, CA 90010
Number and Street: 3530 WILSHIRE BLVD, SUITE 1650
City: LOS ANGELES
State: CA
Zip Code: 90010
Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
Supporting & showing appreciation for community services and programs.

**5. Verification**
I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

Signature of Agency Head or Designee: CINDY WAN
Print Name: CINDY WAN
Title: EXECUTIVE ASSISTANT
Date: 09/02/09

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
1. **Agency Name**
   
   COUNTY OF LOS ANGELES

   **Division, Department, or Region (if applicable)**
   
   BOARD OF SUPERVISOR, 2ND DISTRICT

   **Street Address**
   
   500 WEST TEMPLE STREET, LOS ANGELES 90012

   **Area Code/Phone Number**
   
   (213) 974-2222

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

   **Agency Contact (name and title)**
   
   CINDY WAN, EXECUTIVE ASSISTANT

2. **Event For Which Tickets Were Distributed**
   
   **Date(s) of Event:** 09 / 05 / 09
   
   **Description of Event:** LA COUNTY FAIR

   **Face Value of Ticket:** $17.00

   **Agency Event**
   
   ☐ Yes  ☑ No (Identify source of tickets below.)

   **Name of Outside Source of Ticket(s) Provided to Agency:** LOS ANGELES COUNTY FAIR ASSOCIATION

   **Number of Tickets Received:**

   **Ticket(s) Provided to Agency:** ☐ Gratuitously  ☑ Pursuant to Contract

3. **Agency Official(s) Receiving Ticket(s)**
   
   (use a continuation sheet for additional names)

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
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<tbody>
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</tbody>
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4. **Individual or Organization Receiving Ticket(s)**
   
   (Provided at the behest of an agency official.)

   **Name of Behesting Agency Official:** SUPERVISOR MARK RIDLEY-THOMAS

   **Name of Individual or Organization:** ST. BERNADETTE'S SENIOR GROUP

   **Number of Tickets:** 20

   **Description of Organization:** SENIOR CENTER

   **Address of Organization:**
   
   3825 DON FELIPE DRIVE, LOS ANGELES, CA 90008

   **Purpose for Distribution:** (Describe the public purpose for the distribution to the organization.) Supporting & showing appreciation for community services and youth programs.

5. **Verification**
   
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

   **Signature of Agency Head or Designee:** CINDY WAN

   **Print Name:** EXECUTIVE ASSISTANT

   **Title:**

   **Date:** 09/02/09 (month, day, year)

   **Comment:** (Use this space or an attachment for any additional information including amendment explanation.)
1. Agency Name: COUNTY OF LOS ANGELES
   Division, Department, or Region: BOARD OF SUPERVISOR, 2ND DISTRICT
   Street Address: 500 WEST TEMPLE STREET, LOS ANGELES 90012
   Area Code/Phone Number: (213) 974-2222
   E-mail: cindywan@bos.lacounty.gov
   Agency Contact: CINDY WAN, EXECUTIVE ASSISTANT

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 09 / 05 / 09
   Description of Event: LA COUNTY FAIR
   Face Value of Ticket: $ 17.00
   Agency Event: No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: LOS ANGELES COUNTY FAIR ASSOCIATION
   Number of Tickets Received: _________
   Ticket(s) Provided to Agency: Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: SUPERVISOR MARK RIDLEY-THOMAS
   Name of Individual or Organization: YVONNE BURKE SR. & COMMUNITY CTR
   Number of Tickets: 20
   Description of Organization: SENIOR CENTER
   Address of Organization: 4760 WEST 62ND STREET, LOS ANGELES, CA 90056
   Purpose for Distribution: Supporting & showing appreciation for community services and programs.

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.
   Signature of Agency Head or Designee: _________
   Print Name: CINDY WAN
   Title: EXECUTIVE ASSISTANT
   Date: 09/02/09
**Tickets Provided by Agency Report**

**1. Agency Name**
COUNTY OF LOS ANGELES

**Division, Department, or Region (if applicable)**
BOARD OF SUPERVISOR, 2ND DISTRICT

**Street Address**
500 WEST TEMPLE STREET, LOS ANGELES 90012

**Area Code/Phone Number**
(213) 974-2222
cindywan@bos.lacounty.gov

**Agency Contact (name and title)**
CINDY WAN, EXECUTIVE ASSISTANT

**2. Event For Which Tickets Were Distributed**

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<tr>
<th>Date(s) of Event</th>
<th>Description of Event</th>
<th>Face Value of Ticket</th>
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</thead>
<tbody>
<tr>
<td>09 / 05 / 09</td>
<td>LA COUNTY FAIR</td>
<td>$17.00</td>
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<tr>
<td>10 / 04 / 09</td>
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<td></td>
</tr>
</tbody>
</table>

**Agency Event**
- [X] Yes
- [ ] No (Identify source of tickets below.)

**Name of Outside Source of Ticket(s) Provided to Agency**
LOS ANGELES COUNTY FAIR ASSOCIATION

**Number of Tickets Received**

**Ticket(s) Provided to Agency**
- [ ] Gratuitously
- [X] Pursuant to Contract

**3. Agency Official(s) Receiving Ticket(s)**

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<th>Name of Official (Last, First)</th>
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</table>

**4. Individual or Organization Receiving Ticket(s)**

**Name of Behesting Agency Official**
SUPERVISOR MARK RIDLEY-THOMAS

**Name of Individual or Organization**
CULTURAL EDUCATION PROJECT

**Number of Tickets**
14

**Description of Organization**
Provide cultural experiences to youth and seniors in LA.

**Address of Organization**
P.O. Box 473, Inglewood, CA 90307

**Purpose for Distribution**
(Describe the public purpose for the distribution to the organization.)
Supporting & showing appreciation for community services and programs.

**5. Verification**

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

**Signature of Agency Head or Designee**
CINDY WAN

**Print Name**
EXECUTIVE ASSISTANT

**Title**
09/02/09

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