1. **Agency Name**
   - County of Los Angeles

2. **Event For Which Tickets Were Distributed**
   - **Date(s) of Event:** 2/26/11
   - **Description of Event:** Camino Real Face Value of Ticket: $32
   - **Agency Event:** Yes
   - **Name of Outside Source of Ticket(s) Provided to Agency:** Boston Court Theatre
   - **Number of Tickets Received:** 2
   - **Ticket(s) Provided to Agency:** Gratuitously

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 |
   - | Zucker, Laura | 2 | Policy No. 2.01.5 3b Job duties of the county official required his/her attendance at the event. |

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**
   - **Signature of Agency Head or Designee:** Miriam Gonzalez
   - **Print Name:**
   - **Title:** Executive Assistant
   - **Date:** 3/3/11
   - **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)
   Los Angeles County Arts Commission
   Street Address
   1055 Wilshire Blvd., Suite 800, Los Angeles, CA 90017
   Area Code/Phone Number
   (213) 202-5658
   E-mail mgonzalez@arts.lacounty.gov
   Agency Contact (name and title)
   Miriam Gonzalez

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 2 / 26 / 11
   Description of Event: French Connection
   Face Value of Ticket: $85
   Agency Event
   No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency:
   LA Chamber Orchestra
   Number of Tickets Received: 2
   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>Ono, Emiko</td>
<td>2</td>
<td>Policy No. 2.01.5 3b Job duties of the county official required his/her attendance at the event.</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 ___________________________ (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)
   Los Angeles County Arts Commission
   Street Address
   1055 Wilshire Blvd., Suite, 800, Los Angeles, CA 90017
   Area Code/Phone Number
   (213) 202-5658
   E-mail
   mgonzalez@arts.lacounty.gov
   Agency Contact (name and title)
   Miriam Gonzalez

   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: 2/9/11
   Description of Event: 33 Variations
   Face Value of Ticket: $32
   Agency Event
   Yes   No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency:
   Center Theatre Group
   Number of Tickets Received: 2
   Ticket(s) Provided to Agency: Gratuitously

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
   Zucker, Laura   2   Policy No. 2.01.5 3b Job duties of the county official
                    required his/her attendance at the event.

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behosting 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 16944.1.
   Signature of Agency Head or Designee
   Miriam Gonzalez
   Executive Assistant
   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)
   Los Angeles County Arts Commission

   Street Address
   1055 Wilshire Blvd., Suite, 800, Los Angeles, CA 90017

   Area Code/Phone Number
   (213) 202-5658

   E-mail
   mgonzalez@arts.lacounty.gov

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 2/2/11
   Description of Event: The Break of Noon
   Face Value of Ticket: $70

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

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

   Number of Tickets Received: 2
   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)
   Zucker, Laura

   Number of Tickets
   2

   State Whether the Distribution is Income to the Official or
   Describe the Public Purpose for the Distribution
   Policy No. 2.01.5 3b Job duties of the county official
   required his/her attendance at the event.

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 staff member:
Mmiriam Gonzalez  Executive Assistant

Print Name
Mmiriam Gonzalez

Title
Executive Assistant

(month, day, year) 5/3/11

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

**Agency Contact**

- **Agency Name**: County of Los Angeles
- **Division, Department, or Region (if applicable)**: Los Angeles County Arts Commission
- **Street Address**: 1055 Wilshire Blvd., Suite, 800, Los Angeles, CA 90017
- **Area Code/Phone Number**: (213) 202-5858
- **E-mail**: mgonzalez@arts.lacounty.gov
- **Agency Contact (name and title)**: Miriam Gonzalez

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

---

### 2. Event For Which Tickets Were Distributed

- **Date of Event**: 1/22/11
- **Description of Event**: Circus Incognitus
- **Face Value of Ticket**: $20
- **Agency Event**: Yes
- **Outside Source of Ticket(s) Provided to Agency**: Kirk Douglas Theatre
- **Number of Tickets Received**: 2
- **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>Hudson, Ayanna</td>
<td>2</td>
<td>Policy No. 2.01.5 3b Job duties of the county official required his/her attendance at the event.</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 16944.1.*

**Signature of Agency Requestor/Designee**: Miriam Gonzalez

**Print Name**: Executive Assistant

**Title**: 3/3/11

**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)**

Los Angeles County Arts Commission

**Street Address**

1055 Wilshire Blvd., Suite, 800, Los Angeles, CA 90017

**Area Code/Phone Number**

(213) 202-5858

**E-mail**

mgonzalez@arts.lacounty.gov

**Agency Contact (name and title)**

Miriam Gonzalez

**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>1/21/11</td>
<td>Loving Repeating</td>
<td>$44</td>
</tr>
</tbody>
</table>

**Agency Event**

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

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

International City Theatre

**Number of Tickets Received:**

2

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

☑ Gratuitously  ☐ Pursuant to Contract

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

<table>
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<tr>
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<td>2</td>
<td>Policy No. 2.01.5 3b Job duties of the county official required his/her attendance at the event.</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:

Miriam Gonzalez

Print Name:

Executive Assistant

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)