Tickets Provided by Agency Report

A Public Document

TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name			Date Stamp	California Q02	
County of Los Angeles				Form OUZ	
Division, Department, or Region (if applicable)			8	For Official Use Only	
Arts Commission - Ford Theatres					
Street Address					
2580 Cahuenga Blvd East, Hollywood CA 900	068	10 100000000000000000000000000000000000			
Area Code/Phone Number E-mail		Amendment (Must explain in Part 5.)			
323-461-3673 bkeeter@arts.lacounty.gov					
Agency Contact (name and title)	985	200, MB	Date of Original Filing: _	(month, day, year)	
Breanna Keeter, Ford Theatres Ticketing Mar	nager				
2. Event For Which Tickets Were Distribut	ted				
Date(s) of Event: 06 / 1 / 09 Desc	cription of Ever	nt: <u>Ford Amphi</u>	theatre Summer Seaso	on Events	
	Value of Ticke	et: \$25.00 a	verage		
Agency Event	source of ticke	ts below.)			
Name of Outside Source of Ticket(s) Provided	to Agency:				
Number of Tickets Received:	Ticket(s) Pro	vided to Agenc	y: Gratuitously	☐ Pursuant to Contract	
3. Agency Official(s) Receiving Ticket(s) (use a continuatio	on sheet for addit	tional names)		
Name of Official (Last, First)	Number of Tickets		ther the Distribution is Income to the Official or ribe the Public Purpose for the Distribution		
Lyte, Marjorie (Arts Commisioner) 4 Job duties re			equire attendance at this event: 9/20 (4tix)		
Barron, Carlos (former Arts Commisioner)		Job duties re	require attendance at these events: 6/27 (4tix),		
н	н	Barron, C. co	ontinued: 9/6 (4tix), 9/2	0 (4tix)	
4. Individual or Organization Receiving Ti	cket(s) (Provid	ded at the behes	t of an agency official.)		
Name of Behesting Agency Official:	84 - 983 				
Name of Individual or Organization:			Numbe	er of Tickets:	
Description of Organization:			3 Z =		
Address of Organization:		City		State Zip Code	
Purpose for Distribution: (Describe the public pu	urpose for the dis	stribution to the c	organization.)		
5. Verification					
I have determined that the distribution of tickets set	forth above is in	n accordance wit	h the provisions of FPPC	Regulation 18944.1.	
Breanna K	20000000	Ford	Theatres Ticketing Mg		
Signature of Agendy Head or Designee	Print Name		Title	(month, day, year)	
Comment: (Use this space or an attachment for any a	dditional informatio	on including amend	ament explanation.)		

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Arts Commission - Ford Theatres					
Street Address					
2580 Cahuenga Blvd East, Hollywood CA 900	068				
Area Code/Phone Number E-mail			Amendment (Must explain in Part 5.)		
323-461-3673 bkeeter@arts.lacounty.gov					
Agency Contact (name and title)			Date of Original Filing: (month, day, year)		
Breanna Keeter, Ford Theatres Ticketing Manager					
2. Event For Which Tickets Were Distribute					
Date(s) of Event: 06 / 1 / 09 Desc	ription of Ever	nt: Ford Amphi	theatre Summer Seaso	on Events	
Date(s) of Event: 06 / 1 / 09 Description of Event: Ford Amphitheatre Summer Season Events 10 / 10 / 09 Face Value of Ticket: \$ 25.00 average					
Tace	value of Tiok	σι. ψ			
Agency Event ☑ Yes ☐ No (Identify s	source of ticke	ts below.)			
Name of Outside Source of Ticket(s) Provided	to Agency:				
Number of Tickets Received:	Ticket(s) Pro	vided to Agenc	y: Gratuitously	☐ Pursuant to Contract	
3. Agency Official(s) Receiving Ticket(s) (u	ise a continuatio	on sheet for addi	tional names)		
Name of Official (Last, First)	Number of Tickets		nether the Distribution is Income to the Official or cribe the Public Purpose for the Distribution		
Rosen, Ron (Arts Commisioner) 2 Job duties require attendance			quire attendance at thi	s event: 6/27 (2tix)	
Benitez, Tomas (Arts Commisioner) 14 Job duties			require attendance at these events: 6/7 (2tix),		
n	п	Benitez, T. c	ontinued: 6/28 (6tix), 8/	/16 (2tix), 9/26 (4tix)	
4. Individual or Organization Receiving Tid	cket(s) (Provid	ded at the behes	t of an agency official.)		
Name of Behesting Agency Official:					
Name of Individual or Organization:			Numbe	er of Tickets:	
Description of Organization:					
Address of Organization:		City		State Zip Code	
Purpose for Distribution: (Describe the public pu	rpose for the di	stribution to the o	organization.)		
		H0			
5. Verification	m w w				
I have determined that the distribution of tickets set	forth above is in	n accordance wit	h the provisions of FPPC	Regulation 18944.1.	
BILLIMA ALL Breanna Ke			Theatres Ticketing Mg		
Signature of Agency Head or Designee	Print Name		Title	(month, day, year)	
Comment: (Use this space or an attachment for any ac	dditional informatio	on including amend	dment explanation.)		