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

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

2. Function or Event Information
   Does the agency have a ticket policy? Yes [X] No [ ]
   Face Value of Each Ticket/Pass $ 165.00
   Event Description [Play]
   Date(s) 02 10 13
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [X]
   Ticket(s)/Pass(es) provided by agency? Performing Arts Center of Los Angeles County
   Was ticket distribution made at the behest of agency official? No [X] Yes [ ]

3. Recipients
   * Use Section A to identify the agency's department or unit.  
   * Use Section B to identify an individual.  
   * Use Section C to identify an outside organization.

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

   B. Name of Individual Number of Ticket(s)/Pass(es) Identify one of the following:
       Ceremonial Role [ ] Other [X]
       Income [ ]
       Per ticket policy 5.3 (k)

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

4. Verification
   I have read and understand FPPC Regulations 18144.1 and 18942. I have verified that the distribution set forth above is in accordance with the requirements.
   Signature of Agency Head or Designee: Liz Rangel
   Print Name: Ticket Administrator
   Date: 08/22/13

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

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

2. Function or Event Information
   Does the agency have a ticket policy? Yes [X] No [ ]
   Event Description: Play
   [Provide Title/Explanation]
   Face Value of Each Ticket/Pass $ 165.00
   Date(s): 02-10-13
   Ticket(s)/Pass(e) provided by agency? Yes [X] No [ ]
   If no: Performing Arts Center of Los Angeles County
   Name of Source
   Was ticket distribution made at the behest of agency official? No [X] Yes [ ]
   If yes:
   Official's Name (Last, First)

3. Recipients
   * Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

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

   B. Name of Individual
      (Last, First)
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy
      Identify one of the following:
      Ceremonial Role [ ] Other [X]
      Income [ ]
      If checking "Ceremonial Role" or "Other" describe below:
      Per ticket policy 5.3 (k)

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

4. Verification
   I have read and understood FPPC Regulations 19544.1 and 19942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Liz Rangel
   Signature of Agency Head or Designee
   Print Name: Ticket Administrator
   Title
   (Month, Day, Year)
   08/22/13
   Comment:
   FPPC Form 802 (4/12)
   FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (If Applicable)
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Liz Rangel, Ticket Administrator
   Area Code/Phone Number: 213-974-3333
   E-mail: lrangel@bos.lacounty.gov
   Date of Original Filing:

2. Function or Event Information
   Does the agency have a ticket policy? Yes [X] No [ ]
   Event Description: Play
   Face Value of Each Ticket/Pass $165.00
   Date(s): 02 16 13
   Ticket(s)/Pass(es) provided by agency? Yes [X] No [ ]
   If no: Performing Arts Center of Los Angeles County
   Name of Source:
   Official's Name (Last, First):
   Was ticket distribution made at the behest of agency official? No [X] Yes [ ]
   If yes:

3. Recipients
   Use Section A to identify the agency's department or unit. Use Section B to identify an individual. Use Section C to identify an outside organization.

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

<table>
<thead>
<tr>
<th>Name of Individual (if any)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Liz Rangel</td>
<td>4</td>
<td>Ceremonial Role [X] Other [ ] income [ ] Per ticket policy 5.3 (k)</td>
</tr>
</tbody>
</table>

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

4. Verification
   I have read and understood FPPC Regulations 18044.1 and 1904.1, I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head or Designee
   Print Name
   Title
   (Month, Day, Year)
   Comment:
   FPPC Form 802 (4/12)
   FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

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

2. Function or Event Information
   Does the agency have a ticket policy? Yes [X] No [ ]
   Face Value of Each Ticket/Pass $165.00
   Event Description [Play]
   Date(s) [02] [23] [13]
   Ticket(s)/Pase(es) provided by agency? Yes [X] No [ ]
   If no: Performing Arts Center of Los Angeles County
   Name of Source
   Was ticket distribution made at the behest of agency official? No [X] Yes [ ]
   If yes:
   Official's Name (Last, First)

3. Recipients
   * Use Section A to identify the agency's department or unit.
   * Use Section B to identify an individual.
   * Use Section C to identify an outside organization.

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

   B. Name of Individual
      Number of Ticket(s)/Pass(es)
      Identify one of the following:
      Ceremonial Role [ ] Other [X]
      Income [ ]
      Per ticket policy 5.3 (k)
      Ceremonial Role [ ] Other [ ]
      Income [ ]
      If checking "Ceremonial Role" or "Other" describe below:

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

4. Verification
   I have read and understand FPPC Regulations 19244.1 and 19247. I have verified that the distribution set forth above, is in accordance with the requirements.

   Signature of Agency Head or Designee
   Liz Rangel
   Ticket Administrator
   Print Name
   Title
   Date (Month, Day, Year)
   08/22/13

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

1. Agency Name  
County of Los Angeles  

Division, Department, or Region (If Applicable)  
Board of Supervisors, Third District  

Designated Agency Contact (Name, Title)  
Liz Rangel, Ticket Administrator  

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

Date Stamp  
California Form 802  
For Official Use Only  

☐ Amendment (Must provide explanation in Part 1.)  

Date of Original Filing: (Month, Day, Year)  

2. Function or Event Information  
Does the agency have a ticket policy? Yes ☑ No ☐  
Face Value of Each Ticket/Pass $240.00  

Event Description Opera  
Provide Title/Explanation  

Ticket(s)/Pase(s) provided by agency? Yes ☑ No ☐  
If no: Performing Arts Center of Los Angeles County  
Name of Source  

Was ticket distribution made at the behest of agency official? No ☑ Yes ☐  
If yes: Official’s Name (Last, First)  

3. Recipients  
* Use Section A to identify the agency's department or unit.  
* Use Section B to identify an individual.  
* Use Section C to identify an outside organization.  

A. Name of Agency, Department or Unit  
Number of Ticket(s)/Pass(es)  
Describe the public purpose made pursuant to the agency’s policy  

B. Name of Individual (if any)  
Number of Ticket(s)/Pass(es)  
Identify one of the following:  
Ceremonial Role ☐ Other ☑  
Income ☐  
If checking “Ceremonial Role” or “Other” describe below:  
Per ticket policy 5.3 (k)  

C. Name of Outside Organization (Include address and description)  
Number of Ticket(s)/Pass(es)  
Describe the public purpose made pursuant to the agency’s policy  

4. Verification  
I have read and understand FPPC Regulations 18944 and 19942. I have verified that the distribution set forth above, is in accordance with the requirements.  

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

Comment:  

FPPC Toll-Free Helpline: 866/ASK-FPPC (886/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles

   Division, Department, or Region (If Applicable)
   Board of Supervisors, Third District

   Designated Agency Contact (Name, Title)
   Liz Rangel, Ticket Administrator

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

2. Function or Event Information
   Does the agency have a ticket policy?   Yes [x] No
   Face Value of Each Ticket/Pass $240.00

   Event Description
   Opera

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

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

3. Recipients
   Use Section A to identify the agency's department or unit. 
   Use Section B to identify an individual. 
   Use Section C to identify an outside organization.

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

B. Name of Individual
   Number of Ticket(s)/Pass(es)
   Ceremonial Role [x] Other

   Per ticket policy 5.3 (k)
   Income

   If checking "Ceremonial Role" or "Other" describe below:

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

4. Verification
   I have read and understood FPPC Regulations 18641.1 and 18642. I have verified that the distribution set forth above is in accordance with the requirements.

   [Signature] Liz Rangel
   [Title] Ticket Administrator
   [Date] 08/22/13

   [Comment]

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

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

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Event Description: Play
   Face Value of Each Ticket/Pass $165.00
   Date(s): 04/13/13
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   If no: Performing Arts Center of Los Angeles County
   Name of Source: Official's Name (Last, First)
   Was ticket distribution made at the behest of agency official? No ☑ Yes ☐

3. Recipients
   Use Section A to identify the agency's department or unit.
   Use Section B to identify an individual.
   Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency's policy
   ____________________________________ | ____________________________ | ________________________________________________________________
   ____________________________________ | ____________________________ | ________________________________________________________________
   ____________________________________ | ____________________________ | ________________________________________________________________

   B. Name of Individual (Last, First) | Number of Ticket(s)/Pass(es) | Identify one of the following:
   ____________________________________ | ____________________________ | Ceremonial Role ☐ Other ☑ Income ☐
   ____________________________________ | ____________________________ | Per ticket policy 5.3 (k)
   ____________________________________ | ____________________________ | Ceremonial Role ☐ Other ☐ Income ☐

   C. Name of Outside Organization (Include address and description) | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency's policy
   ____________________________________ | ____________________________ | ________________________________________________________________
   ____________________________________ | ____________________________ | ________________________________________________________________
   ____________________________________ | ____________________________ | ________________________________________________________________

4. Verification
   I have read and understand FPPC Regulations 19824.1 and 19824. I have verified that the distribution set forth above, is in accordance with the requirements.

   Signature of Agency Head or Designee: [Signature]
   Print Name: Liz Rangel
   Title: Ticket Administrator
   Date: 08/22/13

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

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

2. Function or Event Information
   Does the agency have a ticket policy? Yes [X] No [ ]
   Event Description: Dodger game
   Face Value of Each Ticket/Pass $: 34.00
   Date(s): 05-11-13
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [X]
   If no: Los Angeles Dodgers
   Was ticket distribution made at the behest of agency official? No [ ] Yes [X]

3. Recipients
   • Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.
   A. Name of Agency, Department or Unit
      Describe the public purpose made pursuant to the agency's policy
      Number of Ticket(s)/Pass(es)

   B. Name of Individual (Last, First)
      Number of Ticket(s)/Pass(es)
      Ceremonial Role [ ] Other [X]
      Income [ ]
      Per ticket policy 5.3 (k)
      Income [ ]
      Ceremonial Role [ ] Other [ ]
      Income [ ]

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

4. Verification
   I have read and understand FPPC Regulations 18924.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

   Signature of Agency Head or Designee: [Signature]
   Print Name: Liz Rangel
   Title: Ticket Administrator
   Date: 08/13/13

   Comment: [ ]
# Agency Report of:

**Ceremonial Role Events and Ticket/Pass Distributions**

## 1. Agency Name

**County of Los Angeles**

**Division, Department, or Region (If Applicable)**

Board of Supervisors, Third District

**Designated Agency Contact (Name, Title)**

Liz Rangel, Ticket Administrator

**Area Code/Phone Number**

213-974-3333

**E-mail**

irangel@bos.lacounty.gov

## 2. Function or Event Information

- **Does the agency have a ticket policy?** Yes [x] No [ ]

**Event Description**

Dodger game

**Face Value of Each Ticket/Pass** $34.00

**Date(s)**

05 14 13

**Ticket(s)/Pass(es) provided by agency?**

Yes [ ] No [x]

**If no:**

Los Angeles Dodgers

**Name of Source**

**Official’s Name (Last, First)**

## 3. Recipients

- **Use Section A to identify the agency’s department or unit.**
- **Use Section B to identify an individual.**
- **Use Section C to identify an outside organization.**

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

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board of Supervisors Staff</td>
<td>2</td>
<td>Ceremonial Role [ ] Other [x]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income [ ]</td>
</tr>
</tbody>
</table>

**Per ticket policy 5.3 (k)**

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

## 4. Verification

I have read and understand FPPC Regulations 19344.1 and 19342. I have verified that the distribution set forth above is in accordance with the requirements.

**Signature of Agency Head or Designate**

Liz Rangel

Ticket Administrator

**Print Name**

**Title**

**Date (Month, Day, Year)**

09/13/13

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

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (If Applicable)
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Liz Rangel, Ticket Administrator
   Area Code/Phone Number: 213-974-3333
   E-mail: rangel@bos.lacounty.gov
   Date Stamp
   California Form 802
   Amendment (Must provide explanation in Part 3)
   Date of Original Filing: (Month, Day, Year)

2. Function or Event Information
   Does the agency have a ticket policy? Yes [X] No [ ]
   Face Value of Each Ticket/Pass: $34.00
   Event Description: Dodger game
   Date(s): 05 25 13
   Ticket(s)/Pass(es) provided by agency? Yes [X] No [ ]
   If no: Los Angeles Dodgers
   If yes: Official’s Name (Last, First)

3. Recipients
   * Use Section A to identify the agency’s department or unit.
   * Use Section B to identify an individual.
   * Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency’s policy
   | | |
   B. Name of Individual (Last, First) | Number of Ticket(s)/Pass(es) | Identify one of the following:
   | Ceremonial Role [ ] Other [X] Income [ ]
   | if checking “Ceremonial Role” or “Other” describe below:
   | Per ticket policy 5.3 (k)
   | Ceremonial Role [ ] Other [ ] Income [ ]
   | if checking “Ceremonial Role” or “Other” describe below:
   | Board of Supervisors Staff 2 |
   | | |

   C. Name of Outside Organization (Include address and description) | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency’s policy
   | | |

4. Verification
   I have read and understand FPPC Regulations 19241.1 and 19242. I have verified that the distribution set forth above is in accordance with the requirements.
   Signature of Agency Head or Designee
   Liz Rangel
   Print Name
   Title
   Date: 08/13/13

   Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

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

2. Function or Event Information
   Does the agency have a ticket policy? Yes [x] No
   Face Value of Each Ticket/Pass $34.00
   Event Description: Dodger game
   Date(s) 05 26 13
   Ticket(s)/Pass(es) provided by agency? Yes [x] No
   If no: Los Angeles Dodgers
   Was ticket distribution made at the behest of agency official? Yes [x] No
   Official's Name (Last, First)

3. Recipients
   * Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

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

   | Name of Individual (Last, First) | Number of Ticket(s)/Pass(es) | Ceremonial Role [x] Other [ ] Income [ ]
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Board of Supervisors Staff</td>
<td>2</td>
<td>Per ticket policy 5.3 (k)</td>
</tr>
</tbody>
</table>
   |                                  |                             | Ceremonial Role [x] Other [ ] Income [ ]
   |                                  |                             | if checking "Ceremonial Role" or "Other" describe below:     |
   |                                  |                             |                                                               |

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

4. Verification
   I have read and understood FPPC Regulations 19544.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

   Signature of Agency Head or Designee: Liz Rangel
   Print Name: Ticket Administrator
   Date (Month, Day, Year): 08/13/13
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

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

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Event Description: Dodger game
   Face Value of Each Ticket/Pass $34.00
   Date(s): 05 27 13

   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   If no: Los Angeles Dodgers
   Name of Source:
   If yes: Official's Name (Last, First)

3. Recipients
   Use Section A to identify the agency's department or unit.
   Use Section B to identify an individual.
   Use Section C to identify an outside organization.

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

   B. Name of Individual (Last, First)
      Number of Ticket(s)/Pass(es)
      Identify one of the following:
      Ceremonial Role ☐ Other ☑ Income ☐
      Per ticket policy 5.3 (k)
      Ceremonial Role ☐ Other ☐ Income ☐
      If checking "Ceremonial Role" or "Other" describe below:

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

4. Verification
   I have read and understand FPPC Regulations 19344.1 and 19347. I have verified that the distribution set forth above, is in accordance with the requirements.

   Signature of Agency Head of Department: Liz Rangel
   Print Name: Liz Rangel
   Title: Ticket Administrator
   Date (Month, Day, Year): 08/13/13
   Comment:

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles

   Division, Department, or Region (If Applicable)
   Board of Supervisors, Third District

   Designated Agency Contact (Name, Title)
   Liz Rangel, Ticket Administrator

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

2. Function or Event Information
   
   Does the agency have a ticket policy? **Yes**  **No**
   
   Event Description
   Dodger game

   Face Value of Each Ticket/Pass $34.00

   Date(s)
   05 28 13

   Ticket(s)/Pass(es) provided by agency? **Yes**  **No**
   
   If no: Los Angeles Dodgers
   Name of Source
   
   Was ticket distribution made at the behest of agency official? **No**  **Yes**
   
   If yes: Official's Name (Last, First)

3. Recipients

   Use Section A to identify the agency's department or unit.
   Use Section B to identify an individual.
   Use Section C to identify an outside organization.

   **A.** Name of Agency, Department or Unit
   Number of Ticket(s)/Pass(es)
   Describe the public purpose made pursuant to the agency's policy
   
   **B.** Name of Individual
   Number of Ticket(s)/Pass(es)
   Ceremonial Role  **None**  **Other: X**
   If checking "Ceremonial Role" or "Other" describe below:

   Board of Supervisors Staff
   2

   Per ticket policy 5.3 (k)
   Ceremonial Role  **None**  **Other**
   If checking "Ceremonial Role" or "Other" describe below:

   **C.** Name of Outside Organization
   (Include address and description)
   Number of Ticket(s)/Pass(es)
   Describe the public purpose made pursuant to the agency's policy

4. Verification

   I have read and understand FPPC Regulations 18944 (1 and 18947. I have verified that the distribution set forth above, is in accordance with the requirements.

   Liz Rangel
   Signature of Agency Head or Designee

   Print Name

   Date (Month, Day, Year)

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

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

**Division, Department, or Region (If Applicable)**
Board of Supervisors, Third District

**Designated Agency Contact (Name, Title)**
Liz Rangel, Ticket Administrator

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

**Date Stamp**

**2. Function or Event Information**

<table>
<thead>
<tr>
<th>Does the agency have a ticket policy?</th>
<th>Yes[X] No</th>
<th>Face Value of Each Ticket/Pass $</th>
</tr>
</thead>
<tbody>
<tr>
<td>Event Description</td>
<td>Opera</td>
<td>240.00</td>
</tr>
</tbody>
</table>

**Date(s)** 06/05/13

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

**Performing Arts Center of Los Angeles County**

**Name of Source**

**Was ticket distribution made at the behest of agency official?** No[X] Yes

**Official's Name (Last, First)**

**3. Recipients**

*Use Section A to identify the agency's department or unit. Use Section B to identify an individual. Use Section C to identify an outside organization.*

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

<table>
<thead>
<tr>
<th>Name of individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Joel Bellman</td>
<td>2</td>
<td>Ceremonial Role [X] Other</td>
</tr>
</tbody>
</table>

**Per ticket policy 5.3 (k)**

**Ceremonial Role**

**Other**

**Income**

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

**4. Verification**

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

**Signature of Agency Head or Designee**

**Print Name** Liz Rangel
**Title** Ticket Administrator
**Date** 08/22/13

**Comment:**

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
## Agency Report of:
**Ceremonial Role Events and Ticket/Pass Distributions**

### 1. Agency Name
- County of Los Angeles
- Board of Supervisors, Third District
- Liz Rangel, Ticket Administrator

### 2. Function or Event Information
- **Does the agency have a ticket policy?** Yes [X] No □
- **Event Description:** Opera
- **Face Value of Each Ticket/Pass:** $240.00
- **Date(s):** 06-05-13
- **Ticket(s)/Pass(es) provided by agency?** Yes □ No [X]

### 3. Recipients

#### A. Name of Agency, Department or Unit

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

#### B. Name of Individual
- **Name:** Zev Yaroslavsky
- **Number of Ticket(s)/Pass(es):** 2

<table>
<thead>
<tr>
<th>Ceremonial Role</th>
<th>Other [X]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Income</td>
<td></td>
</tr>
</tbody>
</table>

**Per ticket policy 5.3 (b) & (e):**

<table>
<thead>
<tr>
<th>Ceremonial Role</th>
<th>Other</th>
<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 4. Verification
- **I have read and understand FPPC Regulations 18944.1 and 18947. I have verified that the distribution set forth above, is in accordance with the requirements.**

**Liz Rangel**
- **Title:** Ticket Administrator
- **Date:** 08/22/13
- **Comment:**

---

**FPPC Form 802 (4/12)**

FPPC Toll-Free Helpline: 888/ASK-FPPC (888/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (If Applicable)
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Liz Rangel, Ticket Administrator
   Area Code/Phone Number | E-mail
   213-974-3333 | Irangel@bos.lacounty.gov
   Date Stamp
   California Form 802
   For Official Use Only
   Amendment (Must provide explanation in Part 2)
   Date of Original Filing:

2. Function or Event Information
   Does the agency have a ticket policy? Yes [X] No
   Event Description
   Dodger game
   Face Value of Each Ticket/Pass $34.00
   Date(s) 06 07 13
   Ticket(s)/Pass(es) provided by agency? Yes No [X]
   If no: Los Angeles Dodgers
   Name of Source
   Was ticket distribution made at the behest of agency official? No [X] Yes
   If yes: Official's Name (Last, First)

3. Recipients
   * Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit | Number of Ticket(s)/Pass(es) | Describe the purpose made pursuant to the agency's policy

   B. Name of Individual (Last, First) | Number of Ticket(s)/Pass(es) | Identify one of the following:
   Board of Supervisors Staff 2
   Ceremonial Role [ ] Other [X] Income [ ]
   Per ticket policy 5.3 (k)
   Ceremonial Role [ ] Other [ ] Income [ ]
   If checking "Ceremonial Role" or "Other" describe below:

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

4. Verification
   I have read and understand FPPC Regulations 18541.1 and 18542. I have verified that the distribution set forth above is in accordance with the requirements.
   Signature of Agency Head or Designee
   Liz Rangel
   Ticket Administrator
   Title
   08/13/13

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

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

2. Function or Event Information
   Does the agency have a ticket policy? Yes [X] No [ ]
   Face Value of Each Ticket/Pass $34.00
   Event Description
   Dodger game
   [Provide Title/Explanation]
   Date(s)
   06 08 13
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [X]
   Los Angeles Dodgers
   If no: Name of Source
   If yes: Official's Name (Last, First)

3. Recipients
   * Use Section A to identify the agency's department or unit.
   * Use Section B to identify an individual.
   * Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency’s policy

   B. Name of Individual
      Number of Ticket(s)/Pass(es)
      Identify one of the following:
      Ceremonial Role [ ] Other [X] Income [ ]
      Per ticket policy 5.3 (k)
      Ceremonial Role [ ] Other [ ] Income [ ]
      If checking "Ceremonial Role" or "Other" describe below:

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

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18947. I have verified that the distribution set forth above is in accordance with the requirements.

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

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
# Agency Report of:
**Ceremonial Role Events and Ticket/Pass Distributions**

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

**Division, Department, or Region (If Applicable)**
- Board of Supervisors, Third District

**Designated Agency Contact (Name, Title)**
- Liz Rangel, Ticket Administrator

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

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

**Date Stamp**
- California Form 802

**2. Function or Event Information**
- **Does the agency have a ticket policy?** Yes [X] No [ ]
- **Event Description**
  - Concert @ Walt Disney Concert Hall

**Face Value of Each Ticket/Pass $**
- 168.00

**Date(s)**
- 06 22 13

**Ticket(s)/Pass(ee) provided by agency?**
- Yes [X] No [ ]

**If no:** Los Angeles Philharmonic

**Official's Name (Last, First)**
- Name of Source

**3. Recipients**

- Use Section A to identify the agency's department or unit.  
- Use Section B to identify an individual.  
- Use Section C to identify an outside organization.

## A. Name of Agency, Department or Unit

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

## B. Name of Individual

<table>
<thead>
<tr>
<th>Name of Individual</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Ceremonial Role [ ] Other [X] Income [ ]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Joel Sappell</td>
<td>2</td>
<td>Per ticket policy 5.3 (k)</td>
</tr>
</tbody>
</table>

**If checking "Ceremonial Role" or "Other" describe below:**

<table>
<thead>
<tr>
<th>Ceremonial Role [ ] Other [ ] Income [ ]</th>
</tr>
</thead>
</table>

## C. Name of Outside Organization

<table>
<thead>
<tr>
<th>Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**4. Verification**

I have read and understand FPPC Regulations 18024 and 18042. I have verified that the distribution set forth above, is in accordance with the requirements.

**Signature of Agency Head or Designee**
- Liz Rangel

**Print Name**
- Ticket Administrator

**Title**
- (Month, Day, Year)

**Comment:**
- 08/22/13

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

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

   Date Stamp
   California Form 802
   For Official Use Only
   Amendment (Must provide explanation in Part 3)
   Date of Original Filing: (Month, Day, Year)

2. Function or Event Information
   Does the agency have a ticket policy? Yes [X]  No [ ]
   Face Value of Each Ticket/Pass $34.00
   Date(s) 06 26 13
   Event Description Dodger game
   Provide Title/Explanation
   Ticket(s)/Pass(e) provided by agency? Yes [X]  No [ ]
   If no: Los Angeles Dodgers
   Name of Source
   Was ticket distribution made at the behest of agency official? No [X]  Yes [ ]
   If yes: Official's Name (Last, First)

3. Recipients
   Use Section A to identify the agency's department or unit.
   Use Section B to identify an individual.
   Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit  Number of Ticket(s)/Pass(es)  Describe the public purpose made pursuant to the agency's policy
   
   B. Name of Individual  Number of Ticket(s)/Pass(es)  Identify one of the following:
   Ceremonial Role [ ]  Other [X]
   Income [ ]
   If checking "Ceremonial Role" or "Other" describe below:
   Board of Supervisors Staff 2
   Per ticket policy 5.3 (k)
   Ceremonial Role [ ]  Other [ ]
   Income [ ]
   If checking "Ceremonial Role" or "Other" describe below:

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

4. Verification
   I have read and understand FPPC Regulations 18544.1 and 19642. I have verified that the distribution set forth above, is in accordance with the requirements.
   
   Signature of Agency Head or Designee
   Liz Rangel
   Title
   (Month, Day, Year)
   Comment:
   FPPC Form 802 (4/12)
   FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles

   Division, Department, or Region (If Applicable)
   Board of Supervisors, Third District

   Designated Agency Contact (Name, Title)
   Liz Rangel, Ticket Administrator

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

2. Function or Event Information
   Does the agency have a ticket policy? Yes [X] No
   Event Description Dodger game
   Face Value of Each Ticket/Pass $34.00
   Date(s) 06 27 13
   Ticket(s)/Pass(es) provided by agency? Yes [X] No
   If yes: Los Angeles Dodgers
   If no: Name of Source

   Was ticket distribution made at the behest of agency official? No [X] Yes
   If yes: Name of Official (Last, First)

3. Recipients
   Use Section A to identify the agency's department or unit.
   Use Section B to identify an individual.
   Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit Number of Ticket(s)/Pass(es) Describe the public purpose made pursuant to the agency's policy
      
   B. Name of Individual (Last, First) Number of Ticket(s)/Pass(es) Describe the public purpose made pursuant to the agency's policy
      
   Board of Supervisors Staff 2 Per ticket policy 5.3 (k)

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

4. Verification
   I have read and understand FPPC Regulations 18941.1 and 18947. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head of Designee Print Name Title (Month, Day, Year)

Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

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

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Event Description
     Dodger game
     Face Value of Each Ticket/Pass $34.00
   Date(s) 06 29 13
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   If no: Los Angeles Dodgers
   Name of Source
   Was ticket distribution made at the behest of agency official? Yes ☑ No ☐
   If yes: Official's Name (Last, First)

3. Recipients
   Use Section A to identify the agency's department or unit. Use Section B to identify an Individual. Use Section C to identify an outside organization.

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

   B. Name of Individual (Last, First)
      Number of Ticket(s)/Pass(es)
      Identify one of the following:
      Ceremonial Role ☐ Other ☑ Income ☐
      If checking "Ceremonial Role" or "Other" describe below:
      Per ticket policy 5.3 (k)
      Ceremonial Role ☐ Other ☐ Income ☐
      If checking "Ceremonial Role" or "Other" describe below:

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

4. Verification
   I have read and understood FPPC Regulations 18941.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head or Designee
   Liz Rangel
   Print Name
   Title
   (Month, Day, Year)
   Comment:

FPCC Form 802 (4/12)
FPCC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (If Applicable)
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Liz Rangel, Ticket Administrator
   Area Code/Phone Number: 213-974-3333
   E-mail: Irrangel@bos.lacounty.gov
   Date Stamp: California Form 802
   Amendment (Must provide explanation in Part 2.)
   Date of Original Filing: 
   (Month, Day, Year)

2. Function or Event Information
   Does the agency have a ticket policy? Yes[] No[]
   Event Description: Concert @ Walt Disney Concert Hall
   Provide Title/Explanation
   Face Value of Each Ticket/Pass $2@168.00/2@99.00
   Date(s): 06/30/13
   Ticket(s)/Pass(es) provided by agency? Yes[] No[X]
   If no: Los Angeles Philharmonic
   Name of Source:
   If yes: 
   (Official's Name (Last, First))

3. Recipients
   * Use Section A to identify the agency's department or unit. * Use Section B to identify an individual.
   * Use Section C to identify an outside organization.

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

   B. Name of Individual
      Number of Ticket(s)/Pass(es)
      Identify one of the following:
      Ceremonial Role[] Other[X]
      Income[]
      Per ticket policy 5.3 (k)
      If checking "Ceremonial Role" or "Other" describe below:
      Ceremonial Role[] Other[]
      Income[]
      If checking "Ceremonial Role" or "Other" describe below:

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

4. Verification
   I have read and understand FFPC Regulations 18944.1 and 18945. I have verified that the distribution set forth above is in accordance with the requirements.
   Liz Rangel
   Signature of Agency Head or Designee
   Liz Rangel
   Print Name
   Ticket Administrator
   Title
   08/22/13
   (Month, Day, Year)

Comment:

FFPC Form 802 (4/12)
FFPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
### Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

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

#### 2. Function or Event Information
- Does the agency have a ticket policy? Yes ✕ No
- Event Description: Dodger game
- Face Value of Each Ticket/Pass: $34.00
- Date(s): 07/12/13
- Ticket(s)/Pass(es) provided by agency? Yes ☐ No ✕
- If no: Los Angeles Dodgers
- Was ticket distribution made at the behest of agency official? No ☐ Yes ✕

#### 3. Recipients
- Use Section A to identify the agency's department or unit. Use Section B to identify an individual. Use Section C to identify an outside organization.

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

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board of Supervisors Staff</td>
<td>2</td>
<td>Ceremonial Role ☐ Other ✕ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Per ticket policy 5.3 (k)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
</tbody>
</table>

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

#### 4. Verification
- I have read and understood FPPC Regulations 19244.1 and 19245. I have verified that the distribution set forth above is in accordance with the requirements.
- Signature of Agency Head or Designee: Liz Rangel
- Print Name: Liz Rangel
- Title: Ticket Administrator
- Date: 08/13/13

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

1. Agency Name
County of Los Angeles

Division, Department, or Region (If Applicable)

Board of Supervisors, Third District

Designated Agency Contact (Name, Title)
Liz Rangel, Ticket Administrator

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

Date Stamp  A Public Document  California Form 802
For Official Use Only

2. Function or Event Information

Does the agency have a ticket policy?  Yes  No

Event Description  Concert @ Walt Disney Concert Hall

Face Value of Each Ticket/Pass $ 2@168.00/2@99.00

Date(s) 07 14 13

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

If no: Los Angeles Philharmonic

Name of Source

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

If yes:

Official’s Name (Last, First)

3. Recipients

* Use Section A to identify the agency’s department or unit.  * Use Section B to identify an individual.  * Use Section C to identify an outside organization.

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

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ann Miller</td>
<td>4</td>
<td>Ceremonial Role  Other  Income</td>
</tr>
</tbody>
</table>

Per ticket policy 5.3 (k)

Ceremonial Role  Other  Income

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

4. Verification
I have read and understand FPPC Regulations 19644.1 and 19642. I have verified that the distribution set forth above is in accordance with the requirements.

Liz Rangel  Ticket Administrator 08/22/13

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

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

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

2. Function or Event Information
Does the agency have a ticket policy? Yes [x] No
Event Description
Dodger game
Face Value of Each Ticket/Pass $34.00
Date(s) 07 25 13
Ticket(s)/Pass(e)s provided by agency? Yes No [x]
If no: Los Angeles Dodgers
Name of Source
Was ticket distribution made at the behest of agency official? No [x] Yes
If yes:
Official’s Name (Last, First)

3. Recipients
• Use Section A to identify the agency’s department or unit.
• Use Section B to identify an individual.
• Use Section C to identify an outside organization.
   A. Name of Agency, Department or Unit
   Number of Ticket(s)/Pass(e)s
   Describe the public purpose made pursuant to the agency’s policy
   
   B. Name of Individual
   (E.g., Name of Individual, Etc.)
   Number of Ticket(s)/Pass(e)s
   Ceremonial Role [ ] Other [x]
   If checking “Ceremonial Role” or “Other” describe below:
   Per ticket policy 5.3 (k)
   Income [ ]
   Ceremonial Role [ ] Other [ ]
   If checking “Ceremonial Role” or “Other” describe below:
   Income [x]

   C. Name of Outside Organization
   (Include address and description)
   Number of Ticket(s)/Pass(e)s
   Describe the public purpose made pursuant to the agency’s policy
   
4. Verification
I have read and understand FPPC Regulations 1924.1 and 18042. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee
Liz Rangel
Print Name
Ticket Administrator
Title
08/13/13
(Month, Day, Year)

Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (If Applicable)
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Liz Rangel, Ticket Administrator
   Area Code/Phone Number: 213-974-3333
   E-mail: irangel@bos.lacounty.gov
   Date Stamp: California Form 802
   Date of Original Filing: (Month, Day, Year)

2. Function or Event Information
   Does the agency have a ticket policy? Yes [x] No □
   Event Description: Dodger game
   Face Value of Each Ticket/Pass $34.00
   Date(s): 07 27 13
   Ticket(s)/Pass(es) provided by agency? Yes □ No [x]
   If no: Los Angeles Dodgers
   Name of Source: □
   Was ticket distribution made at the behest of agency official? No [x] Yes □
   If yes: □
   Official's Name (Last, First): □

3. Recipients
   • Use Section A to identify the agency's department or unit.
   • Use Section B to identify an individual.
   • Use Section C to identify an outside organization.
   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy

      Name of Individual (Last, First)
      Number of Ticket(s)/Pass(es)
      Identify one of the following:
      Ceremonial Role □ Other: [x]
      Income □
      Per ticket policy 5.3 (k)
      Ceremonial Role □ Other □ Income □
      If checking "Ceremonial Role" or "Other" describe below:

      Name of Outside Organization
      (Include address and description)
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy

4. Verification
   I have read and understand FPPC Regulations 19244.1 and 19247.1. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head of Designer: Liz Rangel
   Print Name: Ticket Administrator
   Title: (Month, Day, Year) 08/13/13
   Comment: □

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (If Applicable)
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Liz Rangel, Ticket Administrator
   Area Code/Phone Number 213-974-3333
   E-mail lrangel@bos.lacounty.gov
   Date Stamp
   A Public Document
   California Form 802
   For Official Use Only
   Amendment (Most provide explanation in Part 3.)
   Date of Original Filing: (Month, Day, Year)

2. Function or Event Information
   Does the agency have a ticket policy? Yes [X] No [ ]
   Event Description Concert @ Walt Disney Concert Hall
   Face Value of Each Ticket/Pass $168.00
   Date(s) 07 28 13
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [X]
   If no: Los Angeles Philharmonic
   Name of Source
   If yes: Official's Name (Last, First)

3. Recipients
   * Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.
   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy
      
      
      B. Name of Individual
         Number of Ticket(s)/Pass(es)
         Identify one of the followings:
         Ceremonial Role [ ] Other [X]
         Income [ ]
         Per ticket policy 5.3 (k)
         Ceremonial Role [ ] Other [ ]
         Income [ ]
         If checking "Ceremonial Role" or "Other" describe below:
      
      
      C. Name of Outside Organization
         Number of Ticket(s)/Pass(es)
         Describe the public purpose made pursuant to the agency's policy
         
         

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head or Designee
   Liz Rangel
   Ticket Administrator
   Print Name
   Title
   (Month, Day, Year)
   Comment:

FPPC Toll-Free Helpline: 888/ASK-FPPC (888/275-7772)
### Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

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

2. **Function or Event Information**
   - Does the agency have a ticket policy? Yes ✕ No
   - Event Description:
     - Dodger game
     - Provide Title/Explanation
   - Face Value of Each Ticket/Pass:
     - $34.00
   - Date(s):
     - 07 28 13
   - Ticket(s)/Pass(es) provided by agency:
     - Yes ☐ No ✕
   - If no: Los Angeles Dodgers
   - Name of Source:
   - Was ticket distribution made at the behest of agency official?
     - No ✕ Yes ☐
   - If yes: Official’s Name (Last, First)

3. **Recipients**
   - Use Section A to identify the agency’s department or unit.
   - Use Section B to identify an individual.
   - Use Section C to identify an outside organization.

   **A. Name of Agency, Department or Unit**
   - Number of Ticket(s)/Pass(es)
   - Describe the public purpose made pursuant to the agency's policy

   **B. Name of Individual**
   - Name of Individual (Last, First)
   - Number of Ticket(s)/Pass(es)
   - Identify one of the following:
     - Ceremonial Role ☐ Other ✕ Income ☐
     - Per ticket policy 5.3 (k)
     - Ceremonial Role ☐ Other ☐ Income ☐

   **C. Name of Outside Organization**
   - Name of Outside Organization (Include address and description)
   - Number of Ticket(s)/Pass(es)
   - Describe the public purpose made pursuant to the agency’s policy

4. **Verification**
   - I have read and understood FPPC Regulations 18924.1 and 18924.2. I have verified that the distribution set forth above, is in accordance with the requirements.

   **Liz Rangel**
   - Signature of Agency Head or designee
   - Print Name: Ticket Administrator
   - Title:
   - Date: 08/13/13

   **Comment:**

---

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

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

2. Function or Event Information
   Does the agency have a ticket policy? Yes [X] No [ ]
   Face Value of Each Ticket/Pass: $34.00
   Event Description: Dodger game
   Date(s): 07 30 13
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [X]
   Los Angeles Dodgers
   Official's Name (Last, First)

3. Recipients
   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy
      
   B. Name of Individual
      Number of Ticket(s)/Pass(es)
      Ceremonial Role [ ] Other [X]
      if checking "Ceremonial Role" or "Other" describe below:
      Board of Supervisors Staff 2
      Per ticket policy 5.3 (k)
      if checking "Ceremonial Role" or "Other" describe below:

   C. Name of Outside Organization
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy
      
4. Verification
   I have read and understand FPPC Regulations 19844.1 and 19842. I have verified that the distribution set forth above is in accordance with the requirements.
   Signature of Agency Head or Designee: Liz Rangel
   Print Name: Ticket Administrator
   Title: 08/13/13
   (Month, Day, Year)
   Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 888/ASK-FPPC (888/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles

   Division, Department, or Region (If Applicable)
   Board of Supervisors, Third District

   Designated Agency Contact (Name, Title)
   Liz Rangel, Ticket Administrator

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

   Date Stamp
   California Form 802
   For Official Use Only

   □ Amendment (Must provide explanation in Part 3)
   Date of Original Filing:
   (Month, Day, Year)

2. Function or Event Information
   Does the agency have a ticket policy? Yes x No □
   Face Value of Each Ticket/Pass $ 34.00
   Event Description Dodger game

   Date(s)
   07 31 13

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

   If no:
   Los Angeles Dodgers

   Name of Source

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

3. Recipients
   • Use Section A to identify the agency's department or unit.
   • Use Section B to identify an individual.
   • Use Section C to identify an outside organization.

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

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

      Ceremonial Role □ Other: x
      Per ticket policy 5.3 (k)
      Income □

      Ceremonial Role □ Other: □
      Income □

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

4. Verification
   I have read and understand FPPC Regulations 19541.1 and 19542. I have verified that the distribution set forth above, is in accordance with the requirements.

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

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

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

2. Function or Event Information
Does the agency have a ticket policy? Yes No
Face Value of Each Ticket/Pass $34.00
Event Description Dodger game
Provide Title/Explanation
Ticket(s)/Pass(es) provided by agency? Yes No
If no: Los Angeles Dodgers
Name of Source
Was ticket distribution made at the behest of agency official? No Yes
If yes:
Officer’s Name (Last, First)

3. Recipients
* Use Section A to identify the agency’s department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit Number of Ticket(s)/Pass(es)
Describe the public purpose made pursuant to the agency’s policy

B. Name of Individual (Last, First)
Number of Ticket(s)/Pass(es)
Identify one of the following:
Ceremonial Role Other
Income
Board of Supervisors Staff 2
Per ticket policy 5.3 (k)
Ceremonial Role Other Income
If checking “Ceremonial Role” or “Other” describe below:

C. Name of Outside Organization (Include address and description)
Number of Ticket(s)/Pass(es)
Describe the public purpose made pursuant to the agency’s policy

4. Verification
I have read and understand FPPC Regulations 19844.1 and 19842. I have verified that the distribution set forth above, is in accordance with the requirements.

Liz Rangel
Ticket Administrator
08/22/13

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

Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

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

   Date Stamp
   California Form 802
   For Official Use Only
   Amendment (Must provide explanation in Part 2)
   Date of Original Filing (Month, Day, Year)

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Event Description
     Dodger game
   Face Value of Each Ticket/Pass $34.00
   Date(s) 08/10/13
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   If no:
     Name of Source
     Los Angeles Dodgers
   Was ticket distribution made at the behest of agency official? No ☐ Yes ☑
   If yes:
     Official's Name (Last, First)

3. Recipients

   • Use Section A to identify the agency's department or unit.
   • Use Section B to identify an individual.
   • Use Section C to identify an outside organization.

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

   B. Name of Individual  Name of Agency, Department or Unit  Number of Ticket(s)/Pass(es)  Identify one of the following:

     Board of Supervisors Staff  2
     Ceremonial Role ☐ Other ☑ Income ☐
     Per ticket policy 5.3 (k)
     If checking "Ceremonial Role" or "Other" describe below:

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

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

4. Verification
   I have read and understand FPPC Regulations 19544.1 and 19542. I have verified that the distribution set forth above, is in accordance with the requirements.

   Signature of Agency Head or Designee  Liz Rangel  Ticket Administrator  08/22/13
   (Month, Day, Year)

   Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (888/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

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

2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No ☐
Event Description: Concert @ Walt Disney Concert Hall
Provide Title/Explanation
Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐
If no: Los Angeles Philharmonic
Name of Source
Was ticket distribution made at the behest of agency official? Yes ☑ No ☐

3. Recipients
- Use Section A to identify the agency’s department or unit.
- Use Section B to identify an individual.
- Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit
Number of Ticket(s)/Pass(es)
Describe the public purpose made pursuant to the agency’s policy

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

   Ceremonial Role ☐ Other ☑ Income ☐
   
   If checking “Ceremonial Role” or “Other” describe below:
   Per ticket policy 5.3 (k)
   
   Ceremonial Role ☐ Other ☐ Income ☐
   
   If checking “Ceremonial Role” or “Other” describe below:

C. Name of Outside Organization (Include address and description)
Number of Ticket(s)/Pass(es)
Describe the public purpose made pursuant to the agency’s policy

4. Verification
I have read and understand FPPC Regulations 18924.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Liz Rangel, Ticket Administrator
08/22/13

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

Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Liz Rangel, Ticket Administrator
   Area Code/Phone Number
   213-974-3333
   E-mail
   lrange@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes[ ] No[ ]
   Event Description
   Concert @ Walt Disney Concert Hall
   Face Value of Each Ticket/Pass $99.00
   Date(s)
   08 11 13
   Ticket(s)/Pass(es) provided by agency? Yes[ ] No[ ]
   If not:
   Name of Source
   Los Angeles Philharmonic
   Official's Name (Last, First)
   Was ticket distribution made at the behest of agency official? No[ ] Yes[ ]

3. Recipients
   Use Section A to identify the agency's department or unit. Use Section B to identify an individual. Use Section C to identify an outside organization.

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

   B. Name of Individual
   Number of Ticket(s)/Pass(es)
   Identify one of the following:
   Ceremonial Role[ ] Other[X]
   Income[ ]
   Per ticket policy 5.3 (k)
   Ceremonial Role[ ] Other[ ]
   Income[ ]

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

4. Verification
   Signature of Agency Head or Designee
   Liz Rangel
   Title
   Ticket Administrator
   Date
   08/22/13
   Comment:

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (If Applicable)
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Liz Rangel, Ticket Administrator
   Area Code/Phone Number   Phone Number
   213-974-3333   Irangel@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes [X] No [ ]
   Event Description: Concert @ Walt Disney Concert Hall
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [X]
   Was ticket distribution made at the behest of agency official? Yes [X] No [ ]
   Face Value of Each Ticket/Pass $168.00
   Date(s): 08/11/13
   If no: Los Angeles Philharmonic
   If yes: Official’s Name (Last, First)

3. Recipients
   * Use Section A to identify the agency’s department or unit.
   * Use Section B to identify an individual.
   * Use Section C to identify an outside organization.

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

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ann Miller</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Per ticket policy 5.3 (k)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Verification
   I have read and understand FPPC Regulations 19844 1 and 19842. I have verified that the distribution set forth above is in accordance with the requirements.

   Signature of Agency Head/Dispute Print Name Title Date (Month, Day, Year)
   Liz Rangel Ticket Administrator 08/22/13

Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 888/ASK-FPPC (888/275-7772)
Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions

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

Date Stamp  
California Form 802
For Official Use Only

Amendment (Must provide explanation in Part 3)  
Date of Original Filing: (Month, Day, Year)

2. Function or Event Information

Does the agency have a ticket policy? Yes ☑ No ☐  
Face Value of Each Ticket/Pass $ 34.00
Event Description: Dodger game  
Date(s) 08 12 13
Ticket(s)/Pass(ees) provided by agency? Yes ☐ No ☑  
If no: Los Angeles Dodgers
Was ticket distribution made at the behest of agency official? No ☑ Yes ☐  
If yes: ____________________________

3. Recipients  
* Use Section A to identify the agency's department or unit.  * Use Section B to identify an individual.  * Use Section C to identify an outside organization.

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

<table>
<thead>
<tr>
<th>Name of Individual (Ex. Liz)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board of Supervisors Staff</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

4. Verification

I have read and understand FPPC Regulations 19344.1 and 19342. I have verified that the distribution set forth above, is in accordance with the requirements.

Liz Rangel  
Ticket Administrator  08/22/13

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

Comment: ____________________________

FPPC Form 802 (4/12)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

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

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No □
   Event Description: Dodger game
   Face Value of Each Ticket/Pass $ □ 34.00
   Date(s) 08 13 13
   Ticket(s)/Pass(ee) provided by agency? Yes □ No ☑
   If no: Los Angeles Dodgers
   Name of Source
   Was ticket distribution made at the behest of agency official? No ☑ Yes □
   If yes: Official's Name (Last, First)

3. Recipients
   Use Section A to identify the agency's department or unit.
   Use Section B to identify an individual.
   Use Section C to identify an outside organization.

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

   B. Name of Individual
      Number of Ticket(s)/Pass(es)
      Identify one of the following:
      Ceremonial Role ☐ Other ☑ Income ☐
      If checking "Ceremonial Role" or "Other" describe below:
      Per ticket policy 5.3 (k)

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

4. Verification
   I have read and understand FPPC Regulations 18942.1 and 18942. I have verified that the distribution set forth above is in accordance with the requirements.
   Liz Rangel
   Signature of Agency Head or Designee
   Print Name
   Title
   (Month, Day, Year)
   Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

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

2. Function or Event Information
Does the agency have a ticket policy?  Yes X  No  
Event Description  Dodger game
Provide Title/Explanation
Face Value of Each Ticket/Pass $ 34.00
Date(s)  08 14 13
Ticket(s)/Pass(es) provided by agency?  Yes  No X
If no: Los Angeles Dodgers
Name of Source
Was ticket distribution made at the behest of agency official?  No X  Yes  
Official’s Name (Last, First)

3. Recipients
* Use Section A to identify the agency’s department or unit.  * Use Section B to identify an individual.  * Use Section C to identify an outside organization.

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

| B. Name of Individual (Last, First) | Number of Ticket(e)/Pass(es) | Identify one of the following:  
Ceremonial Role  Other X  Income  |
|-------------------------------------|-----------------------------|----------------------------------------------------------------|
| Board of Supervisors Staff          | 2                           | Per ticket policy 5.3 (k)  
Ceremonial Role  Other  Income  |
|                                      |                             | If checking “Ceremonial Role” or “Other” describe below.  

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

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above is in accordance with the requirements.

Signature of Agency Head or Designee
Liz Rangel
Ticket Administrator
08/22/13

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

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

2. Function or Event Information
   Does the agency have a ticket policy? Yes [X] No
   Event Description
   Dodger game
   Face Value of Each Ticket/Pass $34.00
   Date(s) 08 24 13
   Ticket(s)/Pass(es) provided by agency? Yes [X] No
   Name of Source
   Los Angeles Dodgers
   Was ticket distribution made at the behest of agency official? No [X] Yes
   Official's Name (Last, First)
   If yes:

3. Recipients
   Use Section A to identify the agency's department or unit. Use Section B to identify an individual. Use Section C to identify an outside organization.
   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy
      
      B. Name of Individual (Last, First)
      Number of Ticket(s)/Pass(es)
      Ceremonial Role [X] Other
      Identify one of the following:
      If checking "Ceremonial Role" or "Other" describe below:
      Per ticket policy 5.3 (k)
      Income
      
      C. Name of Outside Organization
         (Include address and description)
         Number of Ticket(s)/Pass(es)
         Describe the public purpose made pursuant to the agency's policy
         

4. Verification
   I have read and understand FPPC Regulations 19844 and 19902. I have verified that the distribution set forth above, is in accordance with the requirements.
   
   Signature of Agency Head or Designee
   Liz Rangel
   Print Name
   Title
   Date of Original Filing (Month, Day, Year)
   08/22/13
   Comment:
   
   FPPC Form 802 (4/12)
   FPPC Toll-Free Helpline: 888/ASK-FPPC (888/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

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

2. Function or Event Information
   Does the agency have a ticket policy? Yes [X] No [ ]
   Event Description: Dodger game
   Face Value of Each Ticket/Pass $34.00
   Date(s): 08/25/13
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [x]
   If no: Los Angeles Dodgers
   Name of Source
   Was ticket distribution made at the behest of agency official? No [x] Yes [ ]
   If yes: [Official's Name (Last, First)]

3. Recipients
   * Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

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

   B. Name of Individual
      Board of Supervisors Staff
      Number of Ticket(s)/Pass(es): 2
      Per ticket policy 5.3 (k)
      Ceremonial Role [ ] Other [x]
      If checking "Ceremonial Role" or "Other" describe below:

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

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

   Signature: [Liz Rangel]
   Print Name: Liz Rangel
   Title: Ticket Administrator
   Date: 08/22/13

   Comment: [ ]

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (If Applicable)
   Board of Supervisors, Third District
   Designated Agency Contact (Name, Title)
   Liz Rangel, Ticket Administrator
   Area Code/Phone Number: 213-974-3333
   E-mail: Rangel@bos.lacounty.gov
   Date Stamp
   California Form 802
   A Public Document
   Date of Original Filing:
   (Month, Day, Year)

2. Function or Event Information
   Does the agency have a ticket policy? Yes [X] No [ ]
   Event Description: Dodger game
   Face Value of Each Ticket/Pass $34.00
   Date(s): 08 26 13
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [X]
   If no:
   Name of Source: Los Angeles Dodgers
   Name of Source:
   If yes:
   Official’s Name (Last, First):

3. Recipients
   * Use Section A to identify the agency’s department or unit.
   * Use Section B to identify an individual.
   * Use Section C to identify an outside organization.

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

<table>
<thead>
<tr>
<th>Name of Individual</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board of Supervisors Staff</td>
<td>2</td>
<td>Per ticket policy 5.3 (k)</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

4. Verification
I have read and understood FPPC Regulations 18244.1 and 18245. I have verified that the distribution set forth above is in accordance with the requirements.

[Signature]
Liz Rangel
Ticket Administrator
Print Name: 08/22/13
Title: (Month, Day, Year)

Comment:

FFPC Form 802 (4/12)
FPPC Toll-Free Helpline: 888/ASK-FPPC (888/275-7772)
### Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions

**Agency Name**: County of Los Angeles

**Division, Department, or Region (If Applicable)**: Board of Supervisors, Third District

**Designated Agency Contact (Name, Title)**: Liz Rangel, Ticket Administrator

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

**Date Stamp**: California Form 802 (For Official Use Only)

### 2. Function or Event Information

- **Does the agency have a ticket policy?** Yes [x] No [ ]
- **Event Description**: Dodger game
- **Face Value of Each Ticket/Pass $**: 34.00
- **Date(s)**: 08 28 13
- **Ticket(s)/Pass(ing) provided by agency?** Yes [ ] No [x]
- **If no: Los Angeles Dodgers**
- **Name of Source**: 
- **Was ticket distribution made at the behest of agency official?** No [ ] Yes [x]
- **If yes: Office(s) Name (Last, First)**

### 3. Recipients

- **Name of Agency, Department or Unit**
- **Number of Ticket(s)/Pass(es)**
- **Describe the purpose made pursuant to the agency's policy**

#### A.

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

#### B.

- **Name of Individual**
- **Number of Ticket(s)/Pass(es)**
- **Identify one of the following**: Ceremonial Role [ ] Other [x]
  - If checking "Ceremonial Role" or "Other" describe below:
  - **Per ticket policy 5.3(k)**

<table>
<thead>
<tr>
<th>Name of Individual</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Ceremonial Role [ ] Other [x]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board of Supervisors Staff</td>
<td>2</td>
<td>Income [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Per ticket policy 5.3(k)</td>
</tr>
</tbody>
</table>

#### C.

- **Name of Outside Organization** (Include address and description)
- **Number of Ticket(s)/Pass(es)**
- **Describe the purpose made pursuant to the agency's policy**

<table>
<thead>
<tr>
<th>Name of Outside Organization</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Description of the purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 4. Verification

I have read and understand FPPC Regulations 18044.1 and 18047. I have verified that the distribution set forth above is in accordance with the requirements.

**Signature of Agency Head or Designee**

**Print Name**

**Title**

**Date (Month, Day, Year)**: 08/22/13

**Comment**:}

FPPC Form 802 (4/12)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

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

2. Function or Event Information
   Does the agency have a ticket policy? Yes [X] No [ ]
   Face Value of Each Ticket/Pass $34.00
   Event Description: Dodger game
   Event Date(s): 08 31 13
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [X]
   Ticket(s)/Pass(es) provided by agency:
   Los Angeles Dodgers
   If no: [ ]
   If yes: [ ]
   Official’s Name (Last, First)

3. Recipients
   Use Section A to identify the agency’s department or unit. Use Section B to identify an individual. Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency’s policy

   B. Name of Individual (Last, First)
      Number of Ticket(s)/Pass(es)
      Identify one of the following:
      Ceremonial Role [ ] Other [X]
      Per ticket policy 5.3 (k)
      Income [ ]

   C. Name of Outside Organization (Include address and description)
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency’s policy

4. Verification
   I have read and understand FPPC Regulations 18144.1 and 19342. I have verified that the distribution set forth above is in accordance with the requirements.
   Signature: [Signature]
   Print Name: Liz Rangel
   Title: Ticket Administrator
   Date: 08/22/13 (Month, Day, Year)

Comment: [ ]

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)