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

1. Agency Name
Los Angeles County Board of Supervisors
Division, Department, or Region (if applicable)
First District
Street Address
500 West Temple Street, Suite 856, Los Angeles, CA 90012
Designated Agency Contact (Name, Title)
Joanie Paul - Ticket Administrator
Area Code/Phone Number E-mail
213-974-4111 Molina@lacbos.org

2. Function, Event, or Ceremonial Role Information
Title Los Angeles Dodgers
Description Game
Face Value of Each Admission $60.00
Date(s) 01 29 11 04 30 11
Ticket(s)/Admission(s) provided by agency? Yes No X
If no: Los Angeles Dodgers
Name of Source
Was the distribution to persons identified below made at the behest of an agency official?
Yes X No
If yes: Supervisor Gloria Molina
Official’s Name (Last, First) and Title

The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name</th>
<th>Number of Admission(s)/Ticket(s)</th>
<th>Agency Official</th>
</tr>
</thead>
<tbody>
<tr>
<td>LA County Dept. of Children &amp; Family</td>
<td>4</td>
<td>Yes X</td>
</tr>
<tr>
<td>LA County Foster Youth - See Att. A</td>
<td>4</td>
<td>Yes X</td>
</tr>
<tr>
<td>4024 North Durfee Avenue</td>
<td>4</td>
<td>Yes X</td>
</tr>
<tr>
<td>El Monte, CA 91732</td>
<td>4</td>
<td>Yes X</td>
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3. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.

Signature of Agency Head or Designee
Joanie Paul
Print Name
Ticket Administrator
Title
(more, day, year)

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

FPPC Form 802 (2/11)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
<table>
<thead>
<tr>
<th>Purpose of Distribution</th>
<th>Address</th>
<th>Ticket #</th>
<th>Face Value</th>
<th>Name</th>
<th>Date</th>
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**ATTACHMENT A**

**APRIL 2011**

**LOS ANGELES DODGERS GAMES**