1. Agency Name
   County of Los Angeles
   Los Angeles County Arts Commission
   Street Address
   1055 Wilshire Boulevard, Suite 600
   Area Code/Phone Number
   (213) 202-5858
   E-mail
   mgonzalez@arts.lacounty.gov
   Agency Contact (name and title)
   Miriam Gonzalez

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 7/15/09
   Description of Event: Play
   Face Value of Ticket: $60
   Agency Event
   ☑ Yes
   ☐ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency:
   Geffen Playhouse
   Number of Tickets Received: 2
   Ticket(s) Provided to Agency:
   ☐ Gratuitously
   ☐ Pursuant to Contract

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

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Zucker, Laura</td>
<td>2</td>
<td>Policy No 3.01 5.3b - Job duties of the County official require his/her attendance at the event.</td>
</tr>
</tbody>
</table>

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

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

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 19944.1.
   Signature of Agency Head or Designee
   Print Name
   Title
   9/17/09 (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)