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
Designated Agency Contact (Name, Title)
Linda Balderrama - Ticket Administrator
Area Code/Phone Number 213-974-5555
E-mail fifthdistrict@lacbos.org

2. Function or Event Information
Does the agency have a ticket policy? Yes ☒ No ☐
Event Description LA Opera
Provide Title/Explanation
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
Was ticket distribution made at the behest of agency official? Yes ☐ No ☒
Face Value of Each Ticket/Pass $ 215.00
Date(s) 03 / 08 / 15
If no: LA Opera
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 ☐
If checking “Ceremonial Role” or “Other” describe below:
retain quality employees

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 19944.1 and 19942. I have verified that the distribution set forth above, is in accordance with the requirements.

Linda Balderrama
Signature of Agency Head or Designee
Print Name
Ticket Administrator
Title
4/2/15
(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
   Designated Agency Contact (Name, Title)
   Linda Balderrama - Ticket Administrator
   Area Code/Phone Number
   213-974-5555
   E-mail
   fifthdistrict@lacobos.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $215.00
   Event Description LA Opera
   Date(s) 03 / 29 / 15
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   If no: LA Opera
   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
      (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:
      Balderrama, Linda
      2
      retain quality employees

   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 19441 and 19442. I have verified that the distribution set forth above, is in accordance with the requirements.
   Linda Balderrama
   Title
   4/2/15
   (Month, Day, Year)

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

1. Agency Name
   County of Los Angeles
   Board of Supervisors
   Designated Agency Contact (Name, Title)
   Linda Balderrama - Ticket Administrator
   Area Code/Phone Number 213-974-5555
   E-mail fifthdistrict@lacobos.org
   Date Stamp

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Face Value of Each Ticket/Pass $ 170.00
   Event Description LA Dodgers
   Date(s) 03 / 06 / 15
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   If yes: LA Dodgers
   Name of Source
   If no: LA Dodgers

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 ☐
      Retain quality employees
      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 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Linda Balderrama
   Title
   Date 4/2/15

Comment:
# Agency Report of:

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

1. **Agency Name**
   - County of Los Angeles
   - Board of Supervisors
   - Designated Agency Contact (Name, Title)
   - Linda Balderrama - Ticket Administrator
   - Area Code/Phone Number: 213-974-5555
   - E-mail: fifthdistrict@lacobos.org

   **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** $170.00
   - **Event Description** LA Philharmonic
   - **Date(s)** 03 / 04 / 15
   - **Ticket(s)/Pass(es) provided by agency?** Yes [ ] No [x]
   - **If no:** LA Philharmonic
     - **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**
   - **Law Title**
   - **Number of Ticket(s)/Pass(es)**
   - **Identify one of the following:**
     - Achieving specific harms or benefits to a particular group of persons or in the public interest
     - Promote public/private facility
   - **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**
   - I understand 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**
   - Linda Balderrama
   - Ticket Administrator
   - Print Name
   - Title
   - Date (Month, Day, Year)

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

1. Agency Name
   County of Los Angeles
   Board of Supervisors
   Designated Agency Contact (Name, Title)
   Linda Balderrama - Ticket Administrator

   Area Code/Phone Number  E-mail
   213-974-5555 fifthdistrict@laczbs.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Event Description  LA Philharmonic
   Date(s) 04/03/15
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   Was ticket distribution made at the behest of agency official? No ☑ Yes ☐
   Face Value of Each Ticket/Pass $168.00
   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)
      Describe the public purpose made pursuant to the agency's policy
      ____________________________

   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 19441 and 19442. I have verified that the distribution set forth above, is in accordance with the requirements.

   Linda Balderrama  Ticket Administrator  4/2/15
   Signature of Agency Head or Designee  Print Name  Title

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
   Designated Agency Contact (Name, Title)
   Linda Balderrama - Ticket Administrator
   Area Code/Phone Number            E-mail
   213-974-5555                        fifthdistrict@lacbos.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $120.00
   Event Description: LA Philharmonic
   Provide Title/Explanation
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   Date(s) 04 / 04 / 15
   If yes: LA Philharmonic
   If no: Name of Source
   Was ticket distribution made at the behest of agency official? No ☒ 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:
      Henderson, Jerry | | Ceremonial Role ☐ Other ☐ Income ☐
      If checking "Ceremonial Role" or "Other" describe below:
      promote public/private facility

   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 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head or Designee: Linda Balderrama
   Print Name: Ticket Administrator
   Title: 4/2/15 (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
   Designated Agency Contact (Name, Title)
   Linda Balderrama - Ticket Administrator
   Area Code/Phone Number 213-974-5555
   E-mail fifthdistrict@lacbos.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $ 120.00
   Event Description LA Philharmonic
   Date(s) 04 / 04 / 15
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   If no: LA Philharmonic
   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.

   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 ☐
   ______________________________
   | Ceremonial Role ☐ Other ☐ Income ☐
   ______________________________
   | Ceremonial Role ☐ Other ☐ Income ☐

   Balderrama, Linda 4 retaining quality employees
   Balderrama, Linda 4

   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 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
Linda Balderrama
Ticket Administrator
4/2/15

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
   Designated Agency Contact (Name, Title)
   Linda Balderrama - Ticket Administrator
   Area Code/Phone Number   E-mail
   213-974-5555   fifthdistrict@lacbos.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $ 120.00
   Event Description: Ahmanson Theatre
   Provide Title/Explanation
   Date(s) 04 / 04 / 15
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   If no: Ahmanson Theatre
   Name of Source
   Was ticket distribution made at the behest of agency official? No ☒ Yes ☐
   If yes: ____________________________
   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.

<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>Citraro, Al</td>
<td>6</td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>retaining quality employees</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 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Linda Balderrama
Ticket Administrator
4/2/15

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
   Designated Agency Contact (Name, Title)
   Linda Balderrama - Ticket Administrator
   Area Code/Phone Number 213-974-5555
   E-mail fifthdistrict@lacbos.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☐ No ☑
   Face Value of Each Ticket/Pass $ 170.00
   Event Description LA Philharmonic
   Date(s) 12 / 31 / 14
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   If no: LA Philharmonic
   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 ☐
   Promoting public/private facility
   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 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head or Designee Linda Balderrama
   Print Name Ticket Administrator
   Title
   (Month, Day, Year) 4/2/15

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
   Designated Agency Contact (Name, Title)
   Linda Balderrama - Ticket Administrator
   Area Code/Phone Number 213-974-5555
   E-mail fifthdistrict@lacbos.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Face Value of Each Ticket/Pass $ 120.00
   Event Description LA Master Chorale
   Event Description (Provide Title/Explanation)
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   Date(s) 12 / 14 / 14
   If no: LA Master Chorale
   Name of Source
   Was ticket distribution made at the behest of agency official? Yes ☑ No ☐
   If yes:________
   Name of Source (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:

   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
   Blind Childrens Center 4120 Marathos St., LA 90029 2 Support of a nonprofit

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
   Linda Balderrama
   Title
   Ticket Administrator
   4/2/15
   (Month, Day, Year)

Comment: ___________________________

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