Print Form

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

A Public Document

1. Agency Name

County of Los Angeles

Division, Department, or Region *(if applicable)*

Board of Supervisors - 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: 213-974-4111

E-mail: Molina@lacbos.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, Event, or Ceremonial Role Information

Title: LA Philharmonic Performance at Hollywood Bowl

Face Value of Each Admission $: 29.00

Description: Concert

Date(s): 09 / 08 / 11 ; ___ / ___ / ___

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: LA Philharmonic
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☒ No ☐ If yes: Supervisor Gloria Molina
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	• Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.	
Karen Fugate	10	Yes ☐ No ☒		Income ☐
Monterey Care Center		Yes ☐ No ☐		Income ☐
1267 San Gabriel Boulevard		Yes ☐ No ☐		Income ☐
Rosemead, CA 91770		Yes ☐ No ☐		Income ☐
Support community programs.		Yes ☐ No ☐		Income ☐

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

9/10/12
(month, day, year)

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

Print Form

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

A Public Document

1. Agency Name

County of Los Angeles

Division, Department, or Region *(if applicable)*

Board of Supervisors - 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: 213-974-4111

E-mail: Molina@lacbos.org

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☐ Amendment *(Must provide explanation in Part 3.)*

Date of Original Filing: _____ *(month, day, year)*

2. Function, Event, or Ceremonial Role Information

Title: LA Philharmonic Performance at Hollywood Bowl

Face Value of Each Admission $: 29.00

Description: Concert

Date(s): 08 / 30 / 11

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: LA Philharmonic
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☒ No ☐ If yes: Supervisor Gloria Molina
Official's Name (Last, First) and Title

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Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	• Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.	
Letty Guerrero	30	Yes ☐ No ☒		Income ☐
Mayberry Park Part B		Yes ☐ No ☐		Income ☐
13201 Meyer Road		Yes ☐ No ☐		Income ☐
Whittier, CA 90605		Yes ☐ No ☐		Income ☐
Support community programs.		Yes ☐ No ☐		Income ☐

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) | 4/10/12 *(month, day, year)*

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

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

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1. Agency Name

County of Los Angeles

Division, Department, or Region *(if applicable)*

Board of Supervisors - 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: 213-974-4111

E-mail: Molina@lacbos.org

Date Stamp

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For Official Use Only

☐ Amendment *(Must provide explanation in Part 3.)*

Date of Original Filing: _____ *(month, day, year)*

2. Function, Event, or Ceremonial Role Information

Title: LA Philharmonic Performance at Hollywood Bowl

Face Value of Each Admission $: 29.00

Description: Concert

Date(s): 08 / 30 / 11

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: LA Philharmonic *Name of Source*

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☒ No ☐ If yes: Supervisor Gloria Molina *Official's Name (Last, First) and Title*

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	• Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.	
Letty Guerrero	30	Yes ☐ No ☒		Income ☐
Mayberry Park Seniors		Yes ☐ No ☐		Income ☐
13201 Meyer Road		Yes ☐ No ☐		Income ☐
Whittier, CA 90605		Yes ☐ No ☐		Income ☐
Support community programs.		Yes ☐ No ☐		Income ☐

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.

Joanie Paul — Signature of Agency Head or Designee

Joanie Paul — Print Name

Ticket Administrator — Title

9/10/12 *(month, day, year)*

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

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

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County of Los Angeles

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Designated Agency Contact *(Name, Title)*

Joanie Paul - Ticket Administrator

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E-mail: Molina@lacbos.org

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☐ **Amendment** *(Must provide explanation in Part 3.)*

Date of Original Filing: _____ *(month, day, year)*

2. Function, Event, or Ceremonial Role Information

Title: LA Philharmonic Performance at Hollywood Bowl

Face Value of Each Admission $: 29.00

Description: Concert

Date(s): 08 / 24 / 11

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: LA Philharmonic
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☒ No ☐ If yes: Supervisor Gloria Molina
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	• Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.	
Aldo Perez	30	Yes ☐ No ☒		Income ☐
Maywood Parks and Recreation Dept.		Yes ☐ No ☐		Income ☐
4801 East 58th Street		Yes ☐ No ☐		Income ☐
Maywood, CA 90270		Yes ☐ No ☐		Income ☐
Support community programs.		Yes ☐ No ☐		Income ☐

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.

Joanie Paul — Signature of Agency Head or Designee

Joanie Paul — Print Name

Ticket Administrator — Title

4/10/12 — *(month, day, year)*

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

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

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Board of Supervisors - First District

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☐ Amendment *(Must provide explanation in Part 3.)*

Date of Original Filing: _____ *(month, day, year)*

2. Function, Event, or Ceremonial Role Information

Title: LA Philharmonic Performance at Hollywood Bowl

Face Value of Each Admission $: 29.00

Description: Concert

Date(s): 08 / 24 / 11

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: LA Philharmonic
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☒ No ☐ If yes: Supervisor Gloria Molina
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	• Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.	
Claudia Rufino	30	Yes ☐ No ☒		Income ☐
Mexican American Opportunity Fndn.		Yes ☐ No ☐		Income ☐
401 North Garfield Avenue		Yes ☐ No ☐		Income ☐
Montebello, CA 90640		Yes ☐ No ☐		Income ☐
Support community programs.		Yes ☐ No ☐		Income ☐

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

2/10/12
(month, day, year)

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

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Joanie Paul - Ticket Administrator

Area Code/Phone Number: 213-974-4111

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California Form 802

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☐ **Amendment** *(Must provide explanation in Part 3.)*

Date of Original Filing: _____ *(month, day, year)*

2. Function, Event, or Ceremonial Role Information

Title LA Philharmonic Performance at Hollywood Bowl

Face Value of Each Admission $ 29.00

Description Concert

Date(s) 09 / 13 / 11 ___ / ___ / ___

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: LA Philharmonic
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☒ No ☐ If yes: Supervisor Gloria Molina
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	• Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.	
Maria Gallezn	30	Yes ☐ No ☒		Income ☐
Mexican American Opportunity Fndn.		Yes ☐ No ☐		Income ☐
6145 Woodwind Avenue		Yes ☐ No ☐		Income ☐
Maywood, CA 90270		Yes ☐ No ☐		Income ☐
Support community programs.		Yes ☐ No ☐		Income ☐

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.

Joanie Paul — Signature of Agency Head or Designee

Joanie Paul — Print Name

Ticket Administrator — Title

3/10/12 — *(month, day, year)*

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

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

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1. Agency Name

Los Angeles County

Division, Department, or Region *(if applicable)*

Board of Supervisors - First District

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Designated Agency Contact *(Name, Title)*

Joanie Paul - Ticket Administrator

Area Code/Phone Number: 213-974-4111

E-mail: Molina@lacbos.org

Date Stamp

California Form 802

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☐ Amendment *(Must provide explanation in Part 3.)*

Date of Original Filing: _____ *(month, day, year)*

2. Function, Event, or Ceremonial Role Information

Title: LA Philharmonic Performance at Hollywood Bowl

Face Value of Each Admission $: 29.00

Description: Concert

Date(s): 09 / 15 / 11

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: LA Philharmonic
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☒ No ☐ If yes: Supervisor Gloria Molina
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	• Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.	
Jim Ortiz	30	Yes ☐ No ☒		Income ☐
My Friend's House		Yes ☐ No ☐		Income ☐
6525 South Norwalk Boulevard		Yes ☐ No ☐		Income ☐
Whittier, CA 90606		Yes ☐ No ☐		Income ☐
Support community programs		Yes ☐ No ☐		Income ☐

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.

Joanie Paul
Signature of Agency Head or Designee

Joanie Paul
Print Name

Ticket Administrator
Title

9/13/12
(month, day, year)

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

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

A Public Document

1. Agency Name

Los Angeles County

Division, Department, or Region *(if applicable)*

Board of Supervisors - First District

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Designated Agency Contact *(Name, Title)*

Joanie Paul - Ticket Administrator

Area Code/Phone Number: 213-974-4111

E-mail: Molina@lacbos.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, Event, or Ceremonial Role Information

Title LA Philharmonic Performance at Hollywood Bowl

Face Value of Each Admission $ 29.00

Description Concert

Date(s) 08 / 18 / 11

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: LA Philharmonic
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☒ No ☐ If yes: Supervisor Gloria Molina
Official's Name (Last, First) and Title

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Thomas Harang	28	Yes ☐ No ☒		Income ☐
Neighborhood Lgl Srvcs. of LA County		Yes ☐ No ☐		Income ☐
1102 East Chevy Chase Drive		Yes ☐ No ☐		Income ☐
Glendale, CA 91205		Yes ☐ No ☐		Income ☐
Support community programs		Yes ☐ No ☐		Income ☐

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.

Joanie Paul
Signature of Agency Head or Designee

Joanie Paul
Print Name

Ticket Administrator
Title

9/13/22
(month, day, year)

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

Print Form

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

A Public Document

1. Agency Name

Los Angeles County

Division, Department, or Region *(if applicable)*

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Street Address

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Designated Agency Contact *(Name, Title)*

Joanie Paul - Ticket Administrator

Area Code/Phone Number: 213-974-4111

E-mail: Molina@lacbos.org

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☐ **Amendment** *(Must provide explanation in Part 3.)*

Date of Original Filing: _____ *(month, day, year)*

2. Function, Event, or Ceremonial Role Information

Title: LA Philharmonic Performance at Hollywood Bowl

Face Value of Each Admission $: 29.00

Description: Concert

Date(s): 08 / 18 / 11 ___ / ___ / ___

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: LA Philharmonic
Name of Source

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Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

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Ruben Hernandez	30	Yes ☐ No ☒		Income ☐
N. Whittier Neighborhood Watch AHA		Yes ☐ No ☐		Income ☐
1240 Hansford Avenue		Yes ☐ No ☐		Income ☐
Whittier, CA 90601		Yes ☐ No ☐		Income ☐
Support community programs		Yes ☐ No ☐		Income ☐

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.

Joanie Paul
Signature of Agency Head or Designee

Joanie Paul
Print Name

Ticket Administrator
Title

2/13/12
(month, day, year)

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

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

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Los Angeles County

Division, Department, or Region *(if applicable)*
Board of Supervisors - 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: 213-974-4111

E-mail: Molina@lacbos.org

☐ **Amendment** *(Must provide explanation in Part 3.)*

Date of Original Filing: _____ *(month, day, year)*

2. **Function, Event, or Ceremonial Role Information**

Title: LA Philharmonic Performance at Hollywood Bowl

Face Value of Each Admission $: 29.00

Description: Concert

Date(s): 08 / 24 / 11

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: LA Philharmonic
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☒ No ☐ If yes: Supervisor Gloria Molina
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	• Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.	
Al Strange	9	Yes ☐ No ☒		Income ☐
Northeast Democratic Club		Yes ☐ No ☐		Income ☐
Post Office Box 50672		Yes ☐ No ☐		Income ☐
Los Angeles, CA 90050		Yes ☐ No ☐		Income ☐
Support community programs		Yes ☐ No ☐		Income ☐

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.

Joanie Paul
Signature of Agency Head or Designee

Joanie Paul
Print Name

Ticket Administrator
Title

2/13/12
(month, day, year)

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

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1. Agency Name

Los Angeles County

Division, Department, or Region *(if applicable)*

Board of Supervisors - 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

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☐ **Amendment** *(Must provide explanation in Part 3.)*

Date of Original Filing: _____ *(month, day, year)*

2. Function, Event, or Ceremonial Role Information

Title LA Philharmonic Performance at Hollywood Bowl

Face Value of Each Admission $ 29.00

Description Concert

Date(s) 09 / 13 / 11 ___ / ___ / ___

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: LA Philharmonic
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☒ No ☐ If yes: Supervisor Gloria Molina
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	• Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.	
Al Strange	12	Yes ☐ No ☒		Income ☐
Northeast Democratic Club		Yes ☐ No ☐		Income ☐
Post Office Box 50672		Yes ☐ No ☐		Income ☐
Los Angeles, CA 90050		Yes ☐ No ☐		Income ☐
Support community programs		Yes ☐ No ☐		Income ☐

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	Print Name	Title	(month, day, year)
Joanie Paul	Joanie Paul	Ticket Administrator	9/13/12

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

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

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1. Agency Name

Los Angeles County

Division, Department, or Region *(if applicable)*

Board of Supervisors - First District

Street Address

500 West Temple Street, Suite 856, Los Angeles, CA 90012

Designated Agency Contact *(Name, Title)*

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E-mail: Molina@lacbos.org

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☐ **Amendment** *(Must provide explanation in Part 3.)*

Date of Original Filing: _____ *(month, day, year)*

2. Function, Event, or Ceremonial Role Information

Title: LA Philharmonic Performance at Hollywood Bowl

Face Value of Each Admission $: 29.00

Description: Concert

Date(s): 09 / 15 / 11

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: LA Philharmonic
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☒ No ☐ If yes: Supervisor Gloria Molina
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	• Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.	
Oscar Villagomez	14	Yes ☐ No ☒		Income ☐
Norwood Library		Yes ☐ No ☐		Income ☐
4550 North Peck Road		Yes ☐ No ☐		Income ☐
El Monte, CA 91732		Yes ☐ No ☐		Income ☐
Support community programs		Yes ☐ No ☐		Income ☐

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.

Joanie Paul — Signature of Agency Head or Designee

Joanie Paul — Print Name

Ticket Administrator — Title

9/13/12 — *(month, day, year)*

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

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

A Public Document

1. Agency Name

Los Angeles County

Division, Department, or Region *(if applicable)*: Board of Supervisors - 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: 213-974-4111

E-mail: Molina@lacbos.org

Date Stamp

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☐ Amendment *(Must provide explanation in Part 3.)*

Date of Original Filing: _____ *(month, day, year)*

2. Function, Event, or Ceremonial Role Information

Title: LA Philharmonic Performance at Hollywood Bowl

Face Value of Each Admission $: 29.00

Description: Concert

Date(s): 08 / 16 / 11

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: LA Philharmonic *Name of Source*

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☒ No ☐ If yes: Supervisor Gloria Molina *Official's Name (Last, First) and Title*

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	• Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.	
Mary Lee	30	Yes ☐ No ☒		Income ☐
Pacesetters		Yes ☐ No ☐		Income ☐
542 Casuda Canyon Drive		Yes ☐ No ☐		Income ☐
Monterey Park, CA 91754		Yes ☐ No ☐		Income ☐
Support community programs		Yes ☐ No ☐		Income ☐

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.

Joanie Paul *Signature of Agency Head or Designee*

Joanie Paul *Print Name*

Ticket Administrator *Title*

2/13/12 *(month, day, year)*

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

Print Form

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

A Public Document

1. Agency Name

Los Angeles County

Division, Department, or Region *(if applicable)*

Board of Supervisors - 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: 213-974-4111

E-mail: Molina@lacbos.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, Event, or Ceremonial Role Information

Title: LA Philharmonic Performance at Hollywood Bowl

Face Value of Each Admission $: 29.00

Description: Concert

Date(s): 09 / 15 / 11

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: LA Philharmonic
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☒ No ☐ If yes: Supervisor Gloria Molina
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	• Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.	
Valerie Romero	30	Yes ☐ No ☒		Income ☐
Pacific Clinics		Yes ☐ No ☐		Income ☐
1517 West Garvey Avenue		Yes ☐ No ☐		Income ☐
West Covina, CA 91790		Yes ☐ No ☐		Income ☐
Support community programs		Yes ☐ No ☐		Income ☐

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.

Joanie Paul
Signature of Agency Head or Designee

Joanie Paul
Print Name

Ticket Administrator
Title

2/13/12
(month, day, year)

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

Print Form

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

A Public Document

1. Agency Name

Los Angeles County

Division, Department, or Region *(if applicable)*

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Street Address

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Designated Agency Contact *(Name, Title)*

Joanie Paul - Ticket Administrator

Area Code/Phone Number: 213-974-4111

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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, Event, or Ceremonial Role Information

Title: LA Philharmonic Performance at Hollywood Bowl

Face Value of Each Admission $: 29.00

Description: Concert

Date(s): 08 / 16 / 11

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: LA Philharmonic
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☒ No ☐ If yes: Supervisor Gloria Molina
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	• Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.	
Louisa Melendez	30	Yes ☐ No ☒		Income ☐
Parents Anonymous, Inc.		Yes ☐ No ☐		Income ☐
675 West Foothill Blvd., Suite 220		Yes ☐ No ☐		Income ☐
Claremont, CA 91711		Yes ☐ No ☐		Income ☐
Support community programs		Yes ☐ No ☐		Income ☐

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.

Joanie Paul — Signature of Agency Head or Designee

Joanie Paul — Print Name

Ticket Administrator — Title

6/13/11 — *(month, day, year)*

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

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

A Public Document

1. Agency Name

Los Angeles County

Division, Department, or Region *(if applicable)*

Board of Supervisors - 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: (213) 974-4111

E-mail: Molina@lacbos.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, Event, or Ceremonial Role Information

Title LA Philharmonic Performance at Hollywood Bowl

Face Value of Each Admission $ 29.00

Description Concert

Date(s) 09 / 06 / 11 ___ / ___ / ___

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ **If no:** LA Philharmonic
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☒ No ☐ **If yes:** Supervisor Gloria Molina
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	• Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.	
Rick Swanson	50	Yes ☐ No ☒		Income ☐
Ramona Hall Community Center		Yes ☐ No ☐		Income ☐
4580 North Figueroa Street		Yes ☐ No ☐		Income ☐
Los Angeles, CA 90065		Yes ☐ No ☐		Income ☐
Support community programs		Yes ☐ No ☐		Income ☐

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.

Joanie Paul
Signature of Agency Head or Designee

Joanie Paul
Print Name

Ticket Administrator
Title

2/14/12
(month, day, year)

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

Print Form

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

A Public Document

1. Agency Name

Los Angeles County

Division, Department, or Region *(if applicable)*

Board of Supervisors - 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

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, Event, or Ceremonial Role Information

Title LA Philharmonic Performance at Hollywood Bowl

Face Value of Each Admission $ 29.00

Description Concert

Date(s) 09 / 13 / 11 ___ / ___ / ___

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: LA Philharmonic
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☒ No ☐ If yes: Supervisor Gloria Molina
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	• Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.	
John Moretta	30	Yes ☐ No ☒		Income ☐
Resurrection Church		Yes ☐ No ☐		Income ☐
3324 Opal Street		Yes ☐ No ☐		Income ☐
Los Angeles, CA 90023		Yes ☐ No ☐		Income ☐
Support community programs		Yes ☐ No ☐		Income ☐

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	Print Name	Title	(month, day, year)
Joanie Paul	Joanie Paul	Ticket Administrator	2/14/12

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

Print Form

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

A Public Document

1. Agency Name

Los Angeles County

Division, Department, or Region *(if applicable)*

Board of Supervisors - 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: (213) 974-4111

E-mail: Molina@lacbos.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, Event, or Ceremonial Role Information

Title: LA Philharmonic Performance at Hollywood Bowl

Face Value of Each Admission $: 29.00

Description: Concert

Date(s): 08 / 30 / 11

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: LA Philharmonic
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☒ No ☐ If yes: Supervisor Gloria Molina
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	• Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.	
Karla Mercado	30	Yes ☐ No ☒		Income ☐
Rimgrove Park		Yes ☐ No ☐		Income ☐
747 North Rimgrove Drive		Yes ☐ No ☐		Income ☐
La Puente, CA 91744		Yes ☐ No ☐		Income ☐
Support community programs		Yes ☐ No ☐		Income ☐

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) | 2/14/12 *(month, day, year)*

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

Print Form

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

A Public Document

1. Agency Name

Los Angeles County

Division, Department, or Region *(if applicable)*

Board of Supervisors - 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: (213) 974-4111

E-mail: Molina@lacbos.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, Event, or Ceremonial Role Information

Title: LA Philharmonic Performance at Hollywood Bowl

Face Value of Each Admission $: 29.00

Description: Concert

Date(s): 09 / 13 / 11

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: LA Philharmonic
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☒ No ☐ If yes: Supervisor Gloria Molina
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	• Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.	
Veronica Cortez	40	Yes ☐ No ☒		Income ☐
Roosevelt Park		Yes ☐ No ☐		Income ☐
7600 Graham Avenue		Yes ☐ No ☐		Income ☐
Los Angeles, CA 90001		Yes ☐ No ☐		Income ☐
Support community programs		Yes ☐ No ☐		Income ☐

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.

Joanie Paul
Signature of Agency Head or Designee

Joanie Paul
Print Name

Ticket Administrator
Title

2/14/12
(month, day, year)

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

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

A Public Document

1. Agency Name

Los Angeles County

Division, Department, or Region *(if applicable)*

Board of Supervisors - First District

Street Address

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Designated Agency Contact *(Name, Title)*

Joanie Paul, Ticket Administrator

Area Code/Phone Number: (213) 974-4111

E-mail: Molina@lacbos.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, Event, or Ceremonial Role Information

Title: LA Philharmonic Performance at Hollywood Bowl

Face Value of Each Admission $: 29.00

Description: Concert

Date(s): 09 / 06 / 11

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: LA Philharmonic
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☒ No ☐ If yes: Supervisor Gloria Molina
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	• Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.	
Dolores Diaz-Carrey	20	Yes ☐ No ☒		Income ☐
Rotary Club of East Los Angeles		Yes ☐ No ☐		Income ☐
1415 Marianna Road		Yes ☐ No ☐		Income ☐
Pasadena, CA 91105		Yes ☐ No ☐		Income ☐
Support community programs		Yes ☐ No ☐		Income ☐

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.

Joanie Paul
Signature of Agency Head or Designee

Joanie Paul
Print Name

Ticket Administrator
Title

2/14/12
(month, day, year)

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

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

A Public Document

1. Agency Name

Los Angeles County

Division, Department, or Region *(if applicable)*

Board of Supervisors - 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: (213) 974-4111

E-mail: Molina@lacbos.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, Event, or Ceremonial Role Information

Title: LA Philharmonic Performance at Hollywood Bowl

Face Value of Each Admission $: 29.00

Description: Concert

Date(s): 08 / 16 / 11

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: LA Philharmonic
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☒ No ☐ If yes: Supervisor Gloria Molina
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	• Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.	
Chris Griego	10	Yes ☐ No ☒		Income ☐
Saint Hilary Parish		Yes ☐ No ☐		Income ☐
5465 Citronell Avenue		Yes ☐ No ☐		Income ☐
Pico Rivera, CA 90660		Yes ☐ No ☐		Income ☐
Support community programs		Yes ☐ No ☐		Income ☐

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.

Joanie Paul
Signature of Agency Head or Designee

Joanie Paul
Print Name

Ticket Administrator
Title

9/14/12
(month, day, year)

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

Print Form

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

A Public Document

1. Agency Name

Los Angeles County

Division, Department, or Region *(if applicable)*: Board of Supervisors - 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: (213) 974-4111

E-mail: Molina@lacbos.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, Event, or Ceremonial Role Information

Title: LA Philharmonic Performance at Hollywood Bowl

Face Value of Each Admission $: 29.00

Description: Concert

Date(s): 08 / 23 / 11

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: LA Philharmonic *Name of Source*

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☒ No ☐ If yes: Supervisor Gloria Molina *Official's Name (Last, First) and Title*

The identity of recipient(s) and the explanation:

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Lacoya Pugh	30	Yes ☐ No ☒		Income ☐
San Angelo Park		Yes ☐ No ☐		Income ☐
245 South San Angelo Avenue		Yes ☐ No ☐		Income ☐
La Puente, CA 91746		Yes ☐ No ☐		Income ☐
Support community programs		Yes ☐ No ☐		Income ☐

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.

Joanie Paul — Signature of Agency Head or Designee

Joanie Paul — Print Name

Ticket Administrator — Title

2/14/12 *(month, day, year)*

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