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

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   Board of Supervisors
   Street Address
   500 W. Temple St #869 LA 90012
   Designated Agency Contact (Name, Title)
   Linda Balderrama Ticket Administrator
   Area Code/Phone Number
   213-974-5555
   E-mail
   213-974-5555
   fifthdistrict@iacbos.or

2. Function, Event, or Ceremonial Role Information
   Title
   LA Philharmonic
   Description
   Date(s)
   2/12/11 2/18/11
   Face Value of Each Admission $100.00
   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: Antonovich, Mike - Supervisor
   Official's Name (Last, First) and Title
   The identity of recipient(s) and the explanation:

<table>
<thead>
<tr>
<th>Name (Last, First)</th>
<th>Number of Admission(s)/ Ticket(s)</th>
<th>Agency Official</th>
<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Glasgow, Lori</td>
<td>2</td>
<td>Yes ☐ No ☐</td>
<td>Retain quality employees ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☐</td>
<td>Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☐</td>
<td>Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☐</td>
<td>Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☐</td>
<td>Income ☐</td>
</tr>
</tbody>
</table>

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
Linda Balderrama
Print Name
Ticket Administrator
Title
3-18-11 (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Agency Name
County of Los Angeles
Division, Department, or Region (if applicable)
Board of Supervisors
Street Address
500 W. Temple St #869 LA 90012
Designated Agency Contact (Name, Title)
Linda Balderrama Ticket Administrator
Area Code/Phone Number E-mail
213-974-5555 fifthdistrict@iacbos.or

Date Original Filing: (month, day, year)

2. Function, Event, or Ceremonial Role Information

Title ________________________________

Description LA Philharmonic

Face Value of Each Admission $ 100.00

Date(s) 2 / 20 / 11 __________ / __________

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

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

Yes ☐ No ☐ If yes. Antonovich, Mike - Supervisor
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

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</thead>
<tbody>
<tr>
<td>Kid's Community Dental Clinic</td>
<td>2</td>
<td>Yes ☐ No ☐</td>
<td>Fundraiser auction item</td>
</tr>
<tr>
<td>400 W. Elmwood Ave., Burbank CA</td>
<td></td>
<td>Yes ☐ No ☐</td>
<td>Income</td>
</tr>
<tr>
<td>dental services for low income</td>
<td></td>
<td>Yes ☐ No ☐</td>
<td>Income</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Yes ☐ No ☐</td>
<td>Income</td>
</tr>
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Signature of Agency Head or Designee
Linda Balderrama
Ticket Administrator
Title
3-18-11 (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Agency Report of:
Ceremonial Role Events and Ticket/Admission Distributions

1. Agency Name
County of Los Angeles
Division, Department, or Region (if applicable)
Board of Supervisors
Street Address
500 W. Temple St #869 LA 90012
Designated Agency Contact (Name, Title)
Linda Balderrama Ticket Administrator
Area Code/Phone Number
213-974-5555
E-mail
fifthdistrict@lacbos.org

2. Function, Event, or Ceremonial Role Information
Title ________________________________
Face Value of Each Admission $ 100.00
Description LA Philharmonic
Date(s) 3/5/11
Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☐
If no: (Name of Source)
Was the distribution to persons identified below made at the behest of an agency official?
Yes ☐ No ☐
If yes: (Official's Name (Last, First) and Title)

The identity of recipient(s) and the explanation:

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<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nancy Kimm</td>
<td>2</td>
<td>Yes ☐ No ☐</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>promoting public facility for public use</td>
<td></td>
</tr>
</tbody>
</table>

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Signature of Agency Head or Designee
Linda Balderrama
Ticket Administrator
3-18-11
(month, 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)
Agency Report of:
Ceremonial Role Events and
Ticket/Admission Distributions

1. Agency Name

County of Los Angeles
Division, Department, or Region (if applicable)
Board of Supervisors
Street Address
500 W. Temple St #869 LA 90012
Designated Agency Contact (Name, Title)
Linda Balderrama Ticket Administrator
Area Code/Phone Number E-mail
213-974-5555 fifthdistrict@lacos.or

☐ Amendment (Must provide explanation in Part 3.)
Date of Original Filing: ________ (month, day, year)

2. Function, Event, or Ceremonial Role Information

Title ____________________________________________________________
Face Value of Each Admission $ _______ 00
Description LA Philharmonic
Date(s) 3 / 5 / 11 __________
Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☐
If yes: LA Philharmonic
If no: ____________________________________________ Name of Source
Was the distribution to persons identified below made at the behest of an agency official?
Yes ☐ No ☐ If yes: Antonovich, Mike - Supervisor
Official's Name (Last, First) and Title ________________________________

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<tbody>
<tr>
<td>Gayle Sun</td>
<td>2</td>
<td>Yes ☐ No ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>promoting public facility for public use</td>
</tr>
</tbody>
</table>

Income ☐
Income ☐
Income ☐

3. Verification

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_________________________  ___________________________  3-18-11
Signature of Agency Head or Designee  Print Name  Title (month, day, year)

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