

**Tickets Provided by
Agency Report**

A Public Document

TICKETS PROVIDED BY
AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
County of Los Angeles			
Division, Department, or Region (if applicable)			
Department of Treasurer and Tax Collector			
Street Address			
500 W. Temple Street, Room 437			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ <small>(month, day, year)</small>	
(213) 974-2101	msaladino@ttc.lacounty.gov		
Agency Contact (name and title)			
Mark J. Saladino, Treasurer and Tax Collector			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 9 / 17 / 09 ~~to~~ Description of Event: Pompeii and the Roman Villa exhibit
10 / 4 / 09 Face Value of Ticket: \$ n/a

Agency Event Yes No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: _____

Number of Tickets Received: 4 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

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

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Yakimowich, Anthony	2	Monitoring and evaluating County venues
Kelly, Joseph	2	Monitoring and evaluating County venues

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 18944.1.

 _____ Mark J. Saladino _____ Treasurer and Tax Collector _____ 9/18/09
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.)
