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, 2ND DISTRICT
   Designated Agency Contact (Name, Title)
   500 WEST TEMPLE STREET, LOS ANGELES 90012
   Area Code/Phone Number (213) 974-2222
   E-mail cindywan@bos.lacounty.gov

   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 □ No □
   Face Value of Each Ticket/Pass $ 19.00
   Event Description ________________________________
   (Provide Title/Explanation)
   Date(s) ______/_______ ______/_______ ______/_______
   Ticket(s)/Pass(es) provided by agency? Yes □ No X
   If no: LA COUNTY FAIR ASSOCIATION
   Name of Source
   (Optional)
   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

      | 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:

      | 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: |

   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

      | 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 |
      |-----------------------------------------------------------------|-----------------------------|-------------------------------------------------------------|
      | Miracle Workers Senior Citizens Club 5720 2nd Ave., L.A.       | 56                          | Promoting public & private facilities available to county     |

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
   CINDY WAN
   Print Name
   EXECUTIVE ASSISTANT
   Title
   9/3/2014
   (Month, Day, Year)

   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, 2ND DISTRICT

Designated Agency Contact (Name, Title)
500 WEST TEMPLE STREET, LOS ANGELES 90012

Area Code/Phone Number (213) 974-2222
E-mail cindywan@bos.lacounty.gov

**2. Function or Event Information**

| Does the agency have a ticket policy? | Yes □ No □ | Face Value of Each Ticket/Pass $ | 19.00 |
| Event Description |  | Date(s) | / / / / / / |
| Ticket(s)/Pass(es) provided by agency? | Yes □ No X | If no: LA COUNTY FAIR ASSOCIATION |
| 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.

<table>
<thead>
<tr>
<th>A. 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>B. 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></td>
<td></td>
<td>Ceremonial Role □ Other □ Income □</td>
</tr>
</tbody>
</table>

If checking "Ceremonial Role" or "Other", describe below:

<table>
<thead>
<tr>
<th>C. 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>His Sheltering Arms</td>
<td>40</td>
<td>Promoting public &amp; private facilities available to county</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.

Signature of Agency Head or Designee: CINDY WAN
Print Name: EXECUTIVE ASSISTANT
Title: 9/3/2014 (Month, Day, Year)

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, 2ND DISTRICT
Designated Agency Contact (Name, Title)
500 WEST TEMPLE STREET, LOS ANGELES 90012
Area Code/Phone Number (213) 974-2222
E-mail cindywan@bos.lacounty.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☐ No ☐
Face Value of Each Ticket/Pass $19.00
Event Description
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐
If no: LA COUNTY FAIR ASSOCIATION
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.

<table>
<thead>
<tr>
<th>A. 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>B. 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></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking “Ceremonial Role” or “Other” describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking “Ceremonial Role” or “Other” describe below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. 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>Cultural Education Project, Inc.</td>
<td>16</td>
<td>Promoting public &amp; private facilities available to county</td>
</tr>
<tr>
<td>P.O. Box 473, Inglewood</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18943. I have verified that the distribution set forth above, is in accordance with the requirements.

CINDY WAN EXECUTIVE ASSISTANT 9/3/2014
Signature of Agency Head or Designee Print Name Title

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, 2ND DISTRICT
Designated Agency Contact (Name, Title)
500 WEST TEMPLE STREET, LOS ANGELES 90012
Area Code/Phone Number (213) 974-2222
E-mail cindywan@bos.lacounty.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☐ No ☐
Face Value of Each Ticket/Pass $19.00
Event Description
Date(s) _______ / _______ / _______
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐
If no: LA COUNTY FAIR ASSOCIATION
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.

<table>
<thead>
<tr>
<th>A. 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>B. 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></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income ☐</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. 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>St. Eugene 50+ Senior Club</td>
<td>50</td>
<td>Promoting public &amp; private facilities available to county</td>
</tr>
<tr>
<td>9505 Haas Ave., L.A., CA 90047</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.

Signature of Agency Head or Designee: Cindy Wan
Print Name: Cindy Wan
Title: Executive Assistant
Date: 9/3/2014

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, 2ND DISTRICT
Designated Agency Contact (Name, Title)
500 WEST TEMPLE STREET, LOS ANGELES 90012
Area Code/Phone Number: (213) 974-2222
E-mail: cindywan@bos.lacounty.gov

**2. Function or Event Information**
- **Face Value of Each Ticket/Pass $19.00**
- **Event Description**
- **Date(s) / / / /**
- **Ticket(s)/Pass(es) provided by agency?**
  - Yes [ ] No [x]
- **If no:** LA COUNTY FAIR ASSOCIATION
  Name of Source
  Official’s Name (Last, First)

**3. Recipients**

<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>
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<tr>
<th>Name of Individual</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Last, First)</td>
<td></td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Outside Organization</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>Willowbrook Senior Center</td>
<td>40</td>
<td>Promoting public &amp; private facilities available to county</td>
</tr>
<tr>
<td>12915 S. Jarvis Ave., L.A.</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.

CINDY WAN
EXECUTIVE ASSISTANT
9/3/2014

Signature of Agency Head or Designee
Print Name
Title

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
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BOARD OF SUPERVISORS, 2ND DISTRICT
Designated Agency Contact (Name, Title)
500 WEST TEMPLE STREET, LOS ANGELES 90012
Area Code/Phone Number (213) 974-2222
E-mail cindywan@bos.lacounty.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☐ No ☐
Face Value of Each Ticket/Pass $ $19.00
Event Description
Provide Title/Explaination
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
If no: LA COUNTY FAIR ASSOCIATION
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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
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<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking “Ceremonial Role” or “Other” describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking “Ceremonial Role” or “Other” describe below:</td>
</tr>
<tr>
<td>C. Name of Outside Organization (include address and description)</td>
<td>Number of Ticket(s)/Pass(es)</td>
<td>Describe the public purpose made pursuant to the agency’s policy</td>
</tr>
<tr>
<td>Crenshaw Youth</td>
<td>50</td>
<td>Promoting public &amp; private facilities available to county</td>
</tr>
<tr>
<td>4411 11th Ave., Suite 209, L.A.</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.

Signature of Agency Head or Designee: CINDY WAN
Executive Assistant: EXECUTIVE ASSISTANT
Date: 9/3/2014

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, 2ND DISTRICT
Designated Agency Contact (Name, Title)
500 W. TEMPLE ST., LOS ANGELES 90012
Area Code/Phone Number E-mail
(213) 974-2222

2. Function or Event Information
Does the agency have a ticket policy? Yes ☐ No ☐
Face Value of Each Ticket/Pass $ ________
Event Description 2014 LA COUNTY FAIR
Provide Title/Explanation
Date(s) 8 / 29 / 14 9 / 28 / 14
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐
If no: LA COUNTY FAIR ASSOCIATION
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:

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
East Rancho Dominguez Senior Center 25 Promoting public & private facilities available to county
4513 E. Compton Blvd., Compton

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:

CINDY WAN
Print Name
EXECUTIVE ASSISTANT
Title
9/3/2014
(Month, Day, Year)

FPPC Form 802 (4/12)
FPPC Toll-Free Hotline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
COUNTY OF LOS ANGELES
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BOARD OF SUPERVISORS, 2ND DISTRICT
Designated Agency Contact (Name, Title)
500 WEST TEMPLE STREET, LOS ANGELES 90012
Area Code/Phone Number E-mail
(213) 974-2222 cindywan@bos.lacounty.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☐ No ☑
Face Value of Each Ticket/Pass $ 19.00
Event Description
Provide Title/Explanation
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑

If yes: LA COUNTY FAIR ASSOCIATION
Name of Source: ______________

If no: ________________________________
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.

<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>

B. Name of Individual

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following: Ceremonial Role ☐ Other ☐ Income ☐</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐ If checking “Ceremonial Role” or “Other” describe below:</td>
</tr>
</tbody>
</table>

C. Name of Outside Organization (include address and description)

<table>
<thead>
<tr>
<th>Name of Outside Organization</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>Roosevelt Park Senior Center</td>
<td>25</td>
<td>Promoting public &amp; private facilities available to county</td>
</tr>
<tr>
<td>7600 Graham Ave., L.A.</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.

CINDY WAN EXECUTIVE ASSISTANT 9/3/2014
Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

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

1. Agency Name
   COUNTY OF LOS ANGELES
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   Designated Agency Contact *(Name, Title)*
   500 WEST TEMPLE STREET, LOS ANGELES 90012
   Area Code/Phone Number (213) 974-2222
   E-mail cindywan@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☐ No ☐
   Face Value of Each Ticket/Pass $ 19.00
   Event Description ____________________________________________________________
   Date(s) ______/_____/______ ______/_____/______
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐
   If no: LA COUNTY FAIR ASSOCIATION
    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.

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
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<th>Describe the public purpose made pursuant to the agency’s policy</th>
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<tr>
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<td></td>
<td></td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Individual <em>(Last, First)</em></th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following: Ceremonial Role ☐ Other ☐ Income ☐</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐ If checking “Ceremonial Role” or “Other” describe below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Outside Organization <em>(Include address and description)</em></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>Florence Firestone 7807 S. Compton Ave., Los Angeles</td>
<td>20</td>
<td>Promoting public &amp; private facilities available to county</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.
   Signature of Agency Head or Designee CINDY WAN EXECUTIVE ASSISTANT 9/3/2014
   (Month, Day, Year)

Comment: ________________________________________________________________

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
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Ceremonial Role Events and Ticket/Pass Distributions

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   BOARD OF SUPERVISORS, 2ND DISTRICT
   Designated Agency Contact (Name, Title)
   500 WEST TEMPLE STREET, LOS ANGELES 90012
   Area Code/Phone Number
   (213) 974-2222
   E-mail
   cindywan@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☐ No ☐
   Face Value of Each Ticket/Pass $19.00
   Event Description
   [Provide Title/Explanation]
   Date(s) / / / / / / / /
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐
   If no: LA COUNTY FAIR ASSOCIATION
   Name of Source
   [Official’s Name (Last, First)]
   Was ticket distribution made at the behest of agency official? No ☐ 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
   [Table entries]

   B. Name of Individual (Last, First) | Number of Ticket(s)/Pass(es) | Ceremonial Role ☐ Other ☐ Income ☐
   [If checking “Ceremonial Role” or “Other” describe below:]
   [Table entries]

   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
   Empowerment Congress | 20 | Promoting public & private facilities available to county
   [Table entries]

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
   CINDY WAN EXECUTIVE ASSISTANT
   Print Name Title
   9/3/2014 (Month, Day, Year)

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

1. **Agency Name**
   - COUNTY OF LOS ANGELES
   - BOARD OF SUPERVISORS, 2ND DISTRICT
   - 500 W. TEMPLE ST., LOS ANGELES 90012
   - Area Code/Phone Number: (213) 974-2222

   **Designated Agency Contact (Name, Title)**
   - [Name] [Title]

2. **Function or Event Information**
   - **Does the agency have a ticket policy?** Yes ☐ No ☐
   - **Event Description** 2014 LA COUNTY FAIR
   - **Face Value of Each Ticket/Pass** $______
   - **Date(s)** 8/29/14 9/28/14

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**
   - [Name]
   - [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)]
   - [Ceremonial Role ☐ Other ☐ Income ☐]
   - [If checking “Ceremonial Role” or “Other” describe below]:
   - [Ceremonial Role ☐ Other ☐ Income ☐]
   - [If checking “Ceremonial Role” or “Other” describe below]:

   **C. Name of Outside Organization**
   - [Name]
   - [Number of Ticket(s)/Pass(es)]
   - [Describe the public purpose made pursuant to the agency’s policy]
   - [Ulyssess Collins]
   - [4]
   - Promoting public & private facilities available to county

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**: [Signature]
   - **Print Name**: [Print Name]
   - **Title**: EXECUTIVE ASSISTANT
   - **Date**: 9/3/2014

   **Comment**: [Comment]

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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, 2ND DISTRICT
Designated Agency Contact (Name, Title)
500 WEST TEMPLE STREET, LOS ANGELES 90012
Area Code/Phone Number (213) 974-2222
E-mail cindywan@bos.lacounty.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☐ No ☐
Face Value of Each Ticket/Pass $19.00
Event Description Provide Title/Explanation
Date(s) ______/_____/______ ______/_____/______
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐
If no: LA COUNTY FAIR ASSOCIATION
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.

<table>
<thead>
<tr>
<th>A. 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>B. 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></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>if checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>if checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. 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>Amity Foundation</td>
<td>24</td>
<td>Promoting public &amp; private facilities available to county</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.

Signature of Agency Head or Designee CINDY WAN EXECUTIVE ASSISTANT 9/17/2014
Print Name Title (Month, Day, Year)

Comment: 

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 888/ASK-FPPC (888/275-7772)
### 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, 2ND DISTRICT

**Designated Agency Contact (Name, Title)**
500 W. TEMPLE ST., LOS ANGELES 90012

**Area Code/Phone Number**
(213) 974-2222

**E-mail**

**2. Function or Event Information**

- **Does the agency have a ticket policy?** Yes ☐ No ☐
- **Event Description**
  2014 LA COUNTY FAIR
- **Face Value of Each Ticket/Pass**
- **Date(s)**
  8 / 29 / 14
  9 / 28 / 14

**Ticket(s)/Pass(es) provided by agency?** Yes ☐ No ☑

**If no: LA COUNTY FAIR ASSOCIATION**

**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

<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>

#### B. Name of Individual

<table>
<thead>
<tr>
<th>Name of Individual</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Last, First)</td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
</tbody>
</table>

If checking "Ceremonial Role" or "Other" describe below:

- Ceremonial Role ☐ Other ☐ Income ☐

If checking "Ceremonial Role" or "Other" describe below:

#### C. Name of Outside Organization

<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>Second District Staff</td>
<td>70</td>
<td>Promoting public &amp; private facilities available to county</td>
</tr>
<tr>
<td>500 W. Temple Str, L.A. 90012</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**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.

[Signature] CINDY WAN

[Print Name] EXECUTIVE ASSISTANT

[TITLE]

9/3/2014 (Month, Day, Year)

**Comment:**