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

1. **Agency Name**
   - Los Angeles County Board of Supervisors
   - First District
   - Designated Agency Contact (Name, Title)
   - Avianna Uribe, Ticket Administrator
   - Area Code/Phone Number / E-mail:
     - (213) 974-4111 / Molina@lacbos.org

2. **Function or Event Information**
   - Does the agency have a ticket policy? Yes ☒ No ☐
   - Face Value of Each Ticket/Pass $ 50.00
   - Event Description: Concert at Disney Hall
   - Date(s): 07/07/13
   - Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   - If no: Music Center
   - Was ticket distribution made at the behest of agency official? Yes ☒ No ☐
   - If yes: Supervisor Gloria Molina

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**
   - Number of Ticket(s)/Pass(es)
   - Ceremonial Role ☒ Other ☐ Income ☐
   - Identify one of the following:
     - Per Ticket Policy 5.3 (h)
     - Ceremonial Role ☒ Other ☐ Income ☐
   - If checking "Ceremonial Role" or "Other" describe below:

   **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 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: Avianna Uribe
   - Print Name: Ticket Administrator
   - Title: 7/31/15
   - Comment:

   FPPC Form 802 (4/12)
   FPPC Toll-Free Hotline: 866/ASK-FPPC (866/275-7772)
Agency Name:
Los Angeles County Board of Supervisors

Division, Department, or Region (If Applicable):
First District

Designated Agency Contact (Name, Title):
Avianna Uribe, Ticket Administrator

Area Code/Phone Number:
(213) 974-4111
E-mail:
Molina@lacbos.org

Face Value of Each Ticket/Pass: $78.00

Event Description:
Concert at Disney Hall

Date(s):
07/14/13

Ticket(s)/Pass(es) provided by agency:
Yes

Was ticket distribution made at the behest of agency official?
Yes

3. Recipients

A. Name of Agency, Department or Unit:
Board of Supervisors Employee

Number of Ticket(s)/Pass(es):
4

Describe the public purpose made pursuant to the agency’s policy:
Per Ticket Policy 5.3 (k)

B. Name of Individual:

Number of Ticket(s)/Pass(es):

Identify one of the following:

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 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.

Avianna Uribe
Ticket Administrator

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**
   - Los Angeles County Board of Supervisors
   - First District
   - Designated Agency Contact (Name, Title)
   - Avianna Uribe, Ticket Administrator
   - Area Code/Phone Number: (213) 974-4111
   - E-mail: Molina@lacbos.org

2. **Function or Event Information**
   - Does the agency have a ticket policy?: Yes [X] No [ ]
   - Face Value of Each Ticket/Pass: $45.00
   - Event Description: Concert at Disney Hall
   - Date(s): 07 20 13
   - Ticket(s)/Pass(es) provided by agency?: Yes [ ] No [X]
   - Was ticket distribution made at the behest of agency official?: No [ ] Yes [X]
   - If no: Music Center
   - If yes: Supervisor Gloria Molina

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)
   - Ceremonial Role [ ] Other [X]
   - Income [ ]
   - Per Ticket Policy 5.3 (h)
   - Ceremonial Role [ ] Other [ ]
   - Income [ ]

   **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 understood FPPC Regulations 18044.1 and 18042. I have verified that the distribution set forth above, is in accordance with the requirements.
   - Signature of Agency Head or Designee: Avianna Uribe
   - Print Name: Ticket Administrator
   - Title: 7/3/12
   - (Month, Day, Year)

   Comment: FPPC Toll-Free Helpline: 866/ASK-FPPC (986/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Los Angeles County Board of Supervisors
   Division, Department, or Region (if Applicable)
   First District
   Designated Agency Contact (Name, Title)
   Avianna Uribe, Ticket Administrator
   Area Code/Phone Number E-mail
   (213) 974-4111 Molina@lacobos.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Event Description Concert at Disney Hall
   Face Value of Each Ticket/Pass $75.00
   Date(s) 07 20 13
   Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐
   If no: Music Center
   Name of Source
   Was ticket distribution made at the behest of agency official? Yes ☑ No ☐
   If yes: Supervisor Gloria Molina
   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:
      Kerr, John   2   Ceremonial Role ☐ Other ☑ Income ☐
      Per Ticket Policy 5.3 (h)
      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 10944.1 and 19942. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head or Designee Print Name Title
   Avianna Uribe Ticket Administrator 7/3/12
   (Month, Day, Year)

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

1. Agency Name
Los Angeles County Board of Supervisors
Division, Department, or Region (if Applicable)
First District
Designated Agency Contact (Name, Title)
Avianna Uribe, Ticket Administrator
Area Code/Phone Number  E-mail
(213) 974-4111  Molina@lacsos.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  No
Event Description Concert at Disney Hall
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 $78.00
Date(s)  07  28  13
If no:  Music Center
   Name of Source
   Supervisor Gloria Molina
   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>
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</tbody>
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<tr>
<th>B. Name of Individual</th>
<th>Number of Ticket(s)/ Pass(es)</th>
<th>Identify one of the following:</th>
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</thead>
<tbody>
<tr>
<td>Baltazar, Joseph</td>
<td>4</td>
<td>Per Ticket Policy 5.3 (h)</td>
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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.

Avianna Uribe  Ticket Administrator
Signature of Agency Head or Designee  Print Name  Title

Comment:

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