

**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)			
Board of Supervisors, Third District			
Street Address			
500 W. Temple Street, Room 821, Los Angeles, CA 90012			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	
213-974-3333	lrangel@bos.lacounty.gov		
Agency Contact (name and title)			
Liz Rangel			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 05 / 09 / 10 Description of Event: play performed at Ahmanson Theatre

_____ / _____ / _____ Face Value of Ticket: \$ 75.00

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

Name of Outside Source of Ticket(s) Provided to Agency: Performing Arts Center of Los Angeles County

Number of Tickets Received: 2 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
Zev Yaroslavsky	2	job duties require attendance & monitoring 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.


 _____ Liz Rangel _____ Ticket Administrator _____ 3/23/11
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.)

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213-974-3333	lrangel@bos.lacounty.gov		
Agency Contact (name and title)			
Liz Rangel			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 08 / 13 / 10 Description of Event: concert performed at Walt Disney Concert Hall
 _____ Face Value of Ticket: \$ 100.00

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

Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles Philharmonic

Number of Tickets Received: 2 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
Zev Yaroslavsky	2	job duties require attendance & monitoring 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: _____

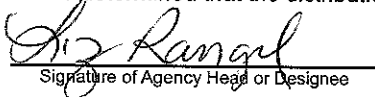
Description of Organization: _____

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.


 _____ Liz Rangel _____ Ticket Administrator _____ 3/23/11
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Agency Contact (name and title) Liz Rangel		Date of Original Filing: _____ (month, day, year)	

2. Event For Which Tickets Were Distributed

Date(s) of Event: 12 / 18 / 10 Description of Event: opera performed at Dorothy Chandler Pavilion
 _____ / _____ / _____ Face Value of Ticket: \$ 195.00

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

Name of Outside Source of Ticket(s) Provided to Agency: Performing Arts Center of Los Angeles County

Number of Tickets Received: 2 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
Zev Yaroslavsky	2	job duties require attendance & monitoring 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.)

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Agency Contact (name and title) Liz Rangel			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 01 / 25 / 11 Description of Event: concert at Walt Disney Concert Hall
 _____ / _____ / _____ Face Value of Ticket: \$ 100.00

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

Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles Philharmonic

Number of Tickets Received: 2 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
Zev Yaroslavsky	2	job duties require attendance & monitoring 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.)

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213-974-3333	lrangel@bos.lacounty.gov		
Agency Contact (name and title)			
Liz Rangel			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 5 / 30 / 10 Description of Event: opera performed at Dorothy Chandler Pavilion
 _____ / _____ / _____ Face Value of Ticket: \$ 195.00

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

Name of Outside Source of Ticket(s) Provided to Agency: Performing Arts Center of Los Angeles County

Number of Tickets Received: 2 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
Alisa Katz	2	retaining highly qualified county employees

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

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Liz Rangel Liz Rangel Ticket Administrator 3/23/11
Signature of Agency Hold or Designee Print Name Title (month, day, year)

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Agency Contact (name and title) Liz Rangel			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 10 / 05 / 10 Description of Event: opera performed at Dorothy Chandler Pavilion
 _____ / _____ / _____ Face Value of Ticket: \$ 195.00

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

Name of Outside Source of Ticket(s) Provided to Agency: Performing Arts Center of Los Angeles County

Number of Tickets Received: 2 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 <small>(Last, First)</small>	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Alisa Katz	2	retaining highly qualified county employees

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

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Liz Rangel Liz Rangel Ticket Administrator 3/23/11
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Agency Contact (name and title) Liz Rangel			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 12 / 01 / 10 Description of Event: performance at Ahmanson Theatre
 _____ / _____ / _____ Face Value of Ticket: \$ 75.00

Agency Event Yes No (Identify source of tickets below.)
 Name of Outside Source of Ticket(s) Provided to Agency: Performing Arts Center of Los Angeles County
 Number of Tickets Received: 2 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
Vivian Rescalvo	2	retaining highly qualified county employees

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

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Liz Rangel Liz Rangel Ticket Administrator 3/23/11
Signature of Agency Head or Designee Print Name Title (month, day, year)

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Agency Contact (name and title) Liz Rangel		Date of Original Filing: _____ (month, day, year)	

2. Event For Which Tickets Were Distributed

Date(s) of Event: 12 / 3 / 10 Description of Event: concert at Walt Disney Concert Hall
 _____ / _____ / _____ Face Value of Ticket: \$ 93.00

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

Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles Philharmonic

Number of Tickets Received: 2 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
Jessica Perez	2	retaining highly qualified county employees

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

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Agency Contact (name and title) Liz Rangel			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 12 / 8 / 10 Description of Event: concert at Walt Disney Concert Hall

 _____ Face Value of Ticket: \$ 100.00

Agency Event Yes No (Identify source of tickets below.)
 Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles Philharmonic
 Number of Tickets Received: 2 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
Regina Marquez	2	retaining highly qualified county employees

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

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Liz Rangel Liz Rangel Ticket Administrator 3/23/11
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Agency Contact (name and title) Liz Rangel			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 12 / 11 / 10 Description of Event: concert at Walt Disney Concert Hall
 _____ / _____ / _____ Face Value of Ticket: \$ 93.00

Agency Event Yes No (Identify source of tickets below.)
 Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles Philharmonic
 Number of Tickets Received: 2 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
Susan Nissman	2	Income

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

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213-974-3333	lrangel@bos.lacounty.gov		
Agency Contact (name and title)			
Liz Rangel			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 12 / 16 / 10 Description of Event: performance at Ahmanson Theatre
 _____ Face Value of Ticket: \$ 75.00

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

Name of Outside Source of Ticket(s) Provided to Agency: Performing Arts Center of Los Angeles County

Number of Tickets Received: 2 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
Lori Wheeler	2	retaining highly qualified county employees

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

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	Liz Rangel	Ticket Administrator	3/23/11
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(month, day, year)</small>

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213-974-3333	lrangel@bos.lacounty.gov		
Agency Contact <i>(name and title)</i>			
Liz Rangel			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 12 / 18 / 10 Description of Event: concert at Walt Disney Concert Hall

Face Value of Ticket: \$ 100.00 & 93.00

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

Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles Philharmonic

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 <small>(Last, First)</small>	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Cynthia Scott	4	retaining highly qualified county employees

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

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	Liz Rangel	Ticket Administrator	3/23/11
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(month, day, year)</small>

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Agency Contact (name and title) Liz Rangel			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 12 / 19 / 10 Description of Event: concert at Walt Disney Concert Hall
 _____ / _____ / _____ Face Value of Ticket: \$ 100.00

Agency Event Yes No (Identify source of tickets below.)
 Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles Philharmonic
 Number of Tickets Received: 2 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
Ben Saltsman	2	retaining highly qualified county employees

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.)

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213-974-3333	lrangel@bos.lacounty.gov		
Agency Contact (name and title)			
Liz Rangel			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 12 / 20 / 10 Description of Event: concert at Walt Disney Concert Hall

Face Value of Ticket: \$ 100.00

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

Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles Philharmonic

Number of Tickets Received: 2 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
Joel Bellman	2	retaining highly qualified county employees

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.)

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Agency Contact (name and title) Liz Rangel			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 12 / 21 / 10 Description of Event: concert at Walt Disney Concert Hall
 _____ / _____ / _____ Face Value of Ticket: \$ 100.00

Agency Event Yes No (Identify source of tickets below.)
 Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles Philharmonic
 Number of Tickets Received: 2 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
Vivian Rescalvo	2	retaining highly qualified county employees

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: _____

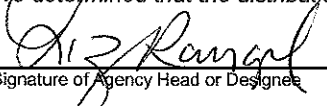
Description of Organization: _____

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.

	Liz Rangel	Ticket Administrator	3/23/11
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(month, day, year)</small>

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

**Tickets Provided by
Agency Report**

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TICKETS PROVIDED BY
AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802 <small>For Official Use Only</small>
County of Los Angeles			
Division, Department, or Region <i>(if applicable)</i>			
Board of Supervisors, Third District			
Street Address			
500 W. Temple Street, Room 821, Los Angeles, CA 90012			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment <i>(Must explain in Part 5.)</i> Date of Original Filing: _____ <small>(month, day, year)</small>	
213-974-3333	lrangel@bos.lacounty.gov		
Agency Contact <i>(name and title)</i>			
Liz Rangel			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 12 / 31 / 10 Description of Event: concert at Walt Disney Concert Hall
 _____ / _____ / _____ Face Value of Ticket: \$ 93.00

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

Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles Philharmonic

Number of Tickets Received: 2 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 <small>(Last, First)</small>	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Georgia Reyes	2	retaining highly qualified county employees

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.

	Liz Rangel	Ticket Administrator	3/23/11
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(month, day, year)</small>

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

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TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name County of Los Angeles		Date Stamp	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) Board of Supervisors, Third District			
Street Address 500 W. Temple Street, Room 821, Los Angeles, CA 90012			
Area Code/Phone Number 213-974-3333	E-mail lrangel@bos.lacounty.gov	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	
Agency Contact (name and title) Liz Rangel			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 11 / 12 / 10 Description of Event: concert at Walt Disney Concert Hall
 _____ / _____ / _____ Face Value of Ticket: \$ 93.00

Agency Event Yes No (Identify source of tickets below.)
 Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles Philharmonic
 Number of Tickets Received: 2 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
Alisa Katz	2	retaining highly qualified county employees

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.

Liz Rangel Liz Rangel Ticket Administrator 3/23/11
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.)

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Board of Supervisors, Third District			
Street Address			
500 W. Temple Street, Room 821, Los Angeles, CA 90012			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	
213-974-3333	lrangel@bos.lacounty.gov		
Agency Contact (name and title)			
Liz Rangel			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 11 / 19 / 10 Description of Event: concert at Walt Disney Concert Hall

Face Value of Ticket: \$ 100.00

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

Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles Philharmonic

Number of Tickets Received: 2 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
Tim Pershing	2	retaining highly qualified county employees

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.


 _____ Liz Rangel _____ Ticket Administrator _____ 3/23/11
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.)

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Division, Department, or Region (if applicable) Board of Supervisors, Third District			
Street Address 500 W. Temple Street, Room 821, Los Angeles, CA 90012			
Area Code/Phone Number 213-974-3333	E-mail lrangel@bos.lacounty.gov	<input type="checkbox"/> Amendment (Must explain in Part 5.)	
Agency Contact (name and title) Liz Rangel		Date of Original Filing: _____ (month, day, year)	

2. Event For Which Tickets Were Distributed

Date(s) of Event: 11 / 21 / 10 Description of Event: concert at Walt Disney Concert Hall
_____/_____/____ Face Value of Ticket: \$ 93.00

Agency Event Yes No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles Philharmonic
Number of Tickets Received: 2 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
Jessica Perez	2	retaining highly qualified county employees

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.

 Liz Rangel Ticket Administrator 3/23/11
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.)

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Street Address 500 W. Temple Street, Room 821, Los Angeles, CA 90012			
Area Code/Phone Number 213-974-3333	E-mail lrangel@bos.lacounty.gov	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	
Agency Contact (name and title) Liz Rangel			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 11 / 27 / 10 Description of Event: concert at Walt Disney Concert Hall
 _____ / _____ / _____ Face Value of Ticket: \$ 93.00

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

Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles Philharmonic

Number of Tickets Received: 2 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
Cynthia Scott	2	retaining highly qualified county employees

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.

 Liz Rangel Ticket Administrator 3/23/11
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.)

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Board of Supervisors, Third District			
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500 W. Temple Street, Room 821, Los Angeles, CA 90012			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	
213-974-3333	lrangel@bos.lacounty.gov		
Agency Contact (name and title)			
Liz Rangel			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 11 / 28 / 10 Description of Event: concert at Walt Disney Concert Hall
 _____ / _____ / _____ Face Value of Ticket: \$ 100.00

Agency Event Yes No (Identify source of tickets below.)
 Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles Philharmonic
 Number of Tickets Received: 2 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
Ginny Kruger	2	retaining highly qualified county employees

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.

Liz Rangel Liz Rangel Ticket Administrator 3/23/11
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.)

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Board of Supervisors, Third District			
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500 W. Temple Street, Room 821, Los Angeles, CA 90012			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment <i>(Must explain in Part 5.)</i> Date of Original Filing: _____ <i>(month, day, year)</i>	
213-974-3333	lrangel@bos.lacounty.gov		
Agency Contact <i>(name and title)</i>			
Liz Rangel			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 10 / 06 / 10 Description of Event: performance at Mark Taper Forum

_____ / _____ / _____ Face Value of Ticket: \$ 45.00

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

Name of Outside Source of Ticket(s) Provided to Agency: Performing Arts Center of Los Angeles County

Number of Tickets Received: 2 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 <small>(Last, First)</small>	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Vivian Rescalvo	2	retaining highly qualified county employees

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: _____

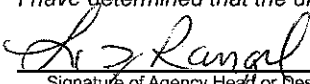
Description of Organization: _____

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.

	Liz Rangel	Ticket Administrator	3/23/11
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(month, day, year)</small>

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

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AGENCY REPORT

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Division, Department, or Region (if applicable) Board of Supervisors, Third District			
Street Address 500 W. Temple Street, Room 821, Los Angeles, CA 90012			
Area Code/Phone Number 213-974-3333	E-mail lrangel@bos.lacounty.gov	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ <small>(month, day, year)</small>	
Agency Contact (name and title) Liz Rangel			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 10 / 23 / 10 Description of Event: concert at Walt Disney Concert Hall
 _____ / _____ / _____ Face Value of Ticket: \$ 100.00

Agency Event Yes No (Identify source of tickets below.)
 Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles Philharmonic
 Number of Tickets Received: 2 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
Ginny Kruger	2	retaining highly qualified county employees

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.

	Liz Rangel	Ticket Administrator	3/23/11
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.)
