Tickets Provided by
Agency Report

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   Board of Supervisors, Third District

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

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 Behothing 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.
   Signature of Agency Head or Designee
   Liz Rangel
   Print Name
   Ticket Administrator
   3/23/11

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by Agency Report

1. Agency Name
   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
   213-974-3333
   E-mail
   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)

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Zev Yaroslavsky</td>
<td>2</td>
<td>job duties require attendance &amp; monitoring county venues</td>
</tr>
</tbody>
</table>

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.

   Signature of Agency Head or Designee
   Liz Rangel
   Print Name
   Ticket Administrator
   3/23/11

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

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Tickets Provided by
Agency Report

A Public Document

1. Agency Name
   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
   213-974-3333
   E-mail
   Irangel@bos.lacounty.gov
   Agency Contact (name and title)
   Liz Rangel

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.)

5. Verification

   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

   Signature of Agency Head or Designee  Print Name  Title  (month, day, year)
   Liz Rangel
   Ticket Administrator
   3/23/11
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by
Agency Report

A Public Document

1. Agency Name
   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
   213-974-3333
   Irangel@bos.lacounty.gov
   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
   □ Yes □ No (Identify source of tickets below.)
   Agency Event
   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)

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Zev Yaroslavsky</td>
<td>2</td>
<td>job duties require attendance &amp; monitoring county venues</td>
</tr>
</tbody>
</table>

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.

   [Signature of Agency Head or Designee]
   [Print Name]
   [Title]
   3/23/11

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

   [Comment]

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
1. **Agency Name**
   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**
213-974-3333

**E-mail**
irangel@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

**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
- [x] Pursuant to Contract

---

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

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alisa Katz</td>
<td>2</td>
<td>retaining highly qualified county employees</td>
</tr>
</tbody>
</table>

---

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:**

**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.

**Signature of Agency Head or Designee:**
Liz Rangel

**Print Name:** Ticket Administrator

**Title:**

**Date:** 3/23/11

**Comment:** (Use this space or an attachment for any additional information including amendment explanation.)
1. Agency Name
   County of Los Angeles
   Board of Supervisors, Third District
   500 W. Temple Street, Room 821, Los Angeles, CA 90012
   Area Code/Phone Number: 213-974-3333
   E-mail: irangel@bos.lacounty.gov
   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: ☑ 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.
   Signature of Agency Head or Designee: Liz Rangel
   Print Name: Ticket Administrator: 3/23/11
   (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
**Tickets Provided by**

**Agency Report**

1. **Agency Name**
   - County of Los Angeles
   - Board of Supervisors, Third District

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

3. **Agency Official(s) Receiving Ticket(s)**
   - Name of Official: Vivian Rescalvo
   - Number of Tickets: 2
   - State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution: retaining highly qualified county employees

4. **Individual or Organization Receiving Ticket(s)**
   - 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.
   - Signature of Agency Head or Designee: Liz Rangel
   - Print Name: Liz Rangel
   - Ticket Administrator:
   - Title:
   - Date: 3/23/11 (month, day, year)
   - Comment: (Use this space or an attachment for any additional information including amendment explanation.)

FPPC Form 802 (Feb/09)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Tickets Provided by Agency Report

1. Agency Name
   County of Los Angeles
   Board of Supervisors, Third District
   500 W. Temple Street, Room 821, Los Angeles, CA 90012
   213-974-3333
   Irangel@bos.lacounty.gov
   Liz Rangel

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
   Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles Philharmonic
   Number of Tickets Received: 2
   Ticket(s) Provided to Agency: √ Gratuitously

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.
   √ Signature of Agency Head or Designee  Liz Rangel  Ticket Administrator  3/23/11
   Print Name
   Title  (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
1. **Agency Name**
   County of Los Angeles

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

3. **Agency Official(s) Receiving Ticket(s)**
   - **Name of Official**
     - Regina Marquez
   - **Number of Tickets:** 2
   - **State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution:** Retaining highly qualified county employees

4. **Individual or Organization Receiving Ticket(s)**
   - **Name of Behesting Agency Official:**
   - **Name of Individual or Organization:**
   - **Number of Tickets:**
   - **Description of Organization:**
   - **Address of Organization:**
   - **Purpose for Distribution:** (Describe the public purpose for the distribution to the organization.)

5. **Verification**
   - **Signature of Agency Head or Designee:** Liz Rangel
   - **Print Name:** Liz Rangel
   - **Ticket Administrator:**
   - **Title:**
   - **Date:** 3/23/11
   - **Comment:** (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by
Agency Report

1. Agency Name
   County of Los Angeles
   Board of Supervisors, Third District

Street Address
   500 W. Temple Street, Room 821, Los Angeles, CA 90012

Area Code/Phone Number
   213-974-3333

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
   Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles Philharmonic
   Number of Tickets Received: 2
   Ticket(s) Provided to Agency: Yes
   Pursuant to Contract

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

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Susan Nissman</td>
<td>2</td>
<td>Income</td>
</tr>
</tbody>
</table>

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.

Signature of Agency Head or Designee: Liz Rangel

Print Name: Ticket Administrator: 3/23/11

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

TTICS PROVIDED BY
AGENCY REPORT
California Form 802
For Official Use Only

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
1. **Agency Name**
   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**
   213-974-3333

   **E-mail**
   Irangel@bos.lacounty.gov

   **Agency Contact (name and title)**
   Liz Rangel

   **Date Stamp**

   **California Form**
   802

   **For Official Use Only**

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
   - **Name of Outside Source of Ticket(s) Provided to Agency:** Performing Arts Center of Los Angeles County
   - **Number of Tickets Provided to Agency:** 2

3. **Agency Official(s) Receiving Ticket(s)**

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lori Wheeler</td>
<td>2</td>
<td>retaining highly qualified county employees</td>
</tr>
</tbody>
</table>

4. **Individual or Organization Receiving Ticket(s)**

   **Name of Behesting Agency Official:**

   **Name of Individual or Organization:**

   **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.

   **Signature of Agency Head or Designee**
   Liz Rangel

   **Print Name**
   Ticket Administrator

   **Title**
   3/23/11

   **Comment:** (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by
Agency Report

1. Agency Name
   County of Los Angeles
   Board of Supervisors, Third District

Street Address
   500 W. Tempie Street, Room 821, Los Angeles, CA 90012

Area Code/Phone Number
   213-974-3333
   irangel@bos.lacounty.gov

Agency Contact (name and title)
   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)

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

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.

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

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by Agency Report

1. Agency Name
   County of Los Angeles
   Board of Supervisors, Third District
   500 W. Temple Street, Room 821, Los Angeles, CA 90012
   Area Code/Phone Number 213-974-3333
   E-mail lrangel@bos.lacounty.gov
   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) Ben Saltsman
   Number of Tickets 2
   State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution 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.
   ____________________________
   Signature of Agency Head or Designee Liz Rangel

   Print Name Ticket Administrator 3/23/11
   Title (month, day, year)

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

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Tickets Provided by
Agency Report

1. Agency Name
   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 213-974-3333
   E-mail irangel@bos.lacounty.gov

   Agency Contact (name and title)
   Liz Rangel

   Date Stamp

   Amendment (Must explain in Part 5.)
   Date of Original Filing: 
   (month, day, year)

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)

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Joel Bellman</td>
<td>2</td>
<td>retaining highly qualified county employees</td>
</tr>
</tbody>
</table>

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.

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

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

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
1. Agency Name
   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
   213-974-3333
   E-mail
   lrangel@bos.lacounty.gov
   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.

   Signature of Agency Head or Designee
   Print Name
   Title
   Date
   (month, day, year)

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

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
## Tickets Provided by Agency Report

### 1. Agency Name
- County of Los Angeles
- Board of Supervisors, Third District

### 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

### 3. Agency Official(s) Receiving Ticket(s)

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Georgia Reyes</td>
<td>2</td>
<td>retaining highly qualified county employees</td>
</tr>
</tbody>
</table>

### 4. Individual or Organization Receiving Ticket(s)

- **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._

**Signature:** Liz Rangel  
**Print Name:** Liz Rangel  
**Title:** Ticket Administrator  
**Date:** 3/23/11
Tickets Provided by
Agency Report

A Public Document

1. Agency Name
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
213-974-3333
E-mail
Iarangel@bos.lacounty.gov
Agency Contact (name and title)
Liz Rangel

Date Stamp

California Form 802
For Official Use Only

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)

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Alisa Katz</td>
<td>2</td>
<td>retaining highly qualified county employees</td>
</tr>
</tbody>
</table>

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
Signature of Agency Head or Designee
Ticket Administrator
Print Name
Title
Date (month, day, year)

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

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
## Tickets Provided by Agency Report

### 1. Agency Name
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**
213-974-3333

**E-mail**
irangel@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)

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tim Pershing</td>
<td>2</td>
<td>retaining highly qualified county employees</td>
</tr>
</tbody>
</table>

### 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.

**Signature of Agency Head or Designee**
Liz Rangel

**Print Name**
Ticket Administrator

**Title**

**Date (month, day, year)**
3/23/11

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

---

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
## Tickets Provided by Agency Report

### 1. Agency Name
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:**
213-974-3333

**E-mail:**
Irange@boc.lacounty.gov

**Agency Contact (name and title):**
Liz Rangel

### 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

**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

### 3. Agency Official(s) Receiving Ticket(s)

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jessica Perez</td>
<td>2</td>
<td>retaining highly qualified county employees</td>
</tr>
</tbody>
</table>

### 4. Individual or Organization Receiving Ticket(s)

**Name of Behesting Agency Official:**

**Name of Individual or Organization:**

**Number of Tickets:**

**Description of Organization:**

**Address of Organization:**

**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._

**Signature of Agency Head of Designee:**

Liz Rangel

**Ticket Administrator:**

3/23/11

**Comment:** (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by Agency Report

1. Agency Name
   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
   213-974-3333

   E-mail
   lrangel@bos.lacounty.gov

   Agency Contact (name and title)
   Liz Rangel

Date Stamp

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.

   Signature of Agency Head or Designee
   Liz Rangel

   Print Name
   Ticket Administrator

   Title
   3/23/11
   (month, day, year)

   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
## Event For Which Tickets Were Distributed

<table>
<thead>
<tr>
<th>Date(s) of Event:</th>
<th>11 / 28 / 10</th>
<th>Description of Event:</th>
<th>concert at Walt Disney Concert Hall</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Face Value of Ticket:</td>
<td>$100.00</td>
</tr>
</tbody>
</table>

- 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: Pursuant to Contract

## Agency Official(s) Receiving Ticket(s)

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ginny Kruger</td>
<td>2</td>
<td>retaining highly qualified county employees</td>
</tr>
</tbody>
</table>

## Individual or Organization Receiving Ticket(s)

- Name of Behesting Agency Official: ____________________________
- Name of Individual or Organization: __________________________  Number of Tickets: _________
- Description of Organization: ________________________________
- Address of Organization: __________________________

- Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

## Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

- Signature of Agency Head or Designee: __________________________
- Print Name: __________________________  Title: __________________________
- Date: 3/23/11 (month, day, year)

- Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by
Agency Report

1. Agency Name
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
213-974-3333 irangel@bos.lacounty.gov

Agency Contact (name and title)
Liz Rangel

☐ Amendment (Must explain in Part 5)
Date of Original Filing: __________ (month, day, year)

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)

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Vivian Rescalvo</td>
<td>2</td>
<td>retaining highly qualified county employees</td>
</tr>
</tbody>
</table>

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: ____________________________

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

Signature of Agency Head or Designee

Ticket Administrator

Print Name

Title

3/23/11 (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by
Agency Report

1. **Agency Name**
   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**
   213-974-3333

   **E-mail**
   lrangel@bos.lacounty.gov

   **Agency Contact (Name and Title)**
   Liz Rangel

   **Date Stamp**

   **California Form** 802

   **For Official Use Only**

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:** Pursuant to Contract

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

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
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</thead>
<tbody>
<tr>
<td>Ginny Kruger</td>
<td>2</td>
<td>retaining highly qualified county employees</td>
</tr>
</tbody>
</table>

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.

   **Signature of Agency Head or Designee**
   Liz Rangel

   **Ticket Administrator**
   3/23/11

   **Print Name**
   Ticket Administrator

   **Title**

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