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

1. Agency Name
County of Los Angeles
Division, Department, or Region (if Applicable)
Board of Supervisors, 3rd District
Designated Agency Contact (Name, Title)
Yolanda Valadez, Ticket Administrator
Area Code/Phone Number E-mail
213 974-3333 yvaladez@bos.lacounty.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☐ No ☑
Face Value of Each Ticket/Pass $ 40.00
Event Description
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
Was ticket distribution made at the behest of agency official? Yes ☑ No ☐
Date(s) 4-14-15

3. Recipients
* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board of Supervisors</td>
<td>2</td>
<td>Per Ticket Policy 5.3(k)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
</table>

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

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18944. I have verified that the distribution set forth above is in accordance with the requirements.

Signature of Agency Head or Designee: Yolanda Valadez
Print Name: Ticket Administrator
Title: (Month, Day, Year)

Comment:

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

1. **Agency Name**
   - County of Los Angeles
   - Board of Supervisors, 3rd District
   - Designated Agency Contact (Name, Title)
   - Yolanda Valadez, Ticket Administrator
   - Area Code/Phone Number: 213 974-3333
   - E-mail: yvaladez@bos.lacounty.gov

2. **Function or Event Information**
   - Does the agency have a ticket policy? Yes ☑ No ☐
   - Event Description: Dodgers Tickets
   - Face Value of Each Ticket/Pass $40.00
   - Date(s): 4/7/15
   - Was ticket distribution made at the behest of agency official? Yes ☑ No ☐

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**
   - Board of Supervisors
   - Number of Ticket(s)/Pass(es): 2
   - Describe the public purpose made pursuant to the agency's policy: Per Ticket Policy 5.3(k)

   **B. Name of Individual**
   - Name of Individual: (Leave Blank)
   - Number of Ticket(s)/Pass(es): (Leave Blank)
   - Identify one of the following:
     - Ceremonial Role ☑ Other ☐ Income ☐
     - Ceremonial Role ☐ Other ☑ Income ☐
     - Ceremonial Role ☐ Other ☐ Income ☑

   **C. Name of Outside Organization**
   - Name of Outside Organization: (Include address and description)
   - Number of Ticket(s)/Pass(es): (Leave Blank)
   - Describe the public purpose made pursuant to the agency's policy:

4. **Verification**
   - I have read and understand FPPC Regulations 18944.1 and 18948. I have verified that the distribution set forth above is in accordance with the requirements:
   - Signature of Agency Head or Designee: Yolanda Valadez
   - Print Name: Ticket Administrator
   - Title: (Leave Blank)
   - Date: 5/29/15

Comment:

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

1. Agency Name
   County of Los Angeles
   Board of Supervisors, 3rd District
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number: 213 974-3333
   E-mail: yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☐ No ☐
   Event Description: Dodgers Tickets
   Face Value of Each Ticket/Pass: $40.00
   Date(s): 4/8/15
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   If no: Los Angeles Dodgers Source of Tickets:
   Was ticket distribution made at the behest of agency official? No ☐ Yes ☐
   If yes: [Additional information]

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
      Board of Supervisors
      2
      Per Ticket Policy 5.3(k)

   B. Name of Individual
      (Last, First)
      Number of Ticket(s)/Pass(es)
      Identify one of the following:
      Ceremonial Role ☐ Other ☐ Income ☐
      If checking "Ceremonial Role" or "Other" describe below:
      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 16964. 1 and 18443. I have verified that the distribution set forth above is in accordance with the requirements.
   Yolanda Valadez
   Ticket Administrator
   5/29/15

Comment:

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

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if Applicable)
   Board of Supervisors, 3rd District
   Designated Agency Contact (Name, Title)
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number
   213 974-3333
   E-mail
   yvaladez@bos.lacounty.gov
   Date Stamp
   California Form 802
   For Official Use Only
   Amendment (Must provide explanation in Part 3)
   Date of Original Filing:
   (Month, Day, Year)

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Face Value of Each Ticket/Pass $ 40.00
   Event Description
   Dodger Tickets
   Date(s)
   4/14/15
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   If no:
   Los Angeles Dodgers
   Return of Source
   Was ticket distribution made at the behest of agency official? No ☐ Yes ☑
   If yes:
   Official’s Name (Last, First)

3. Recipients
   * Use Section A to identify the agency’s department or unit.
   * Use Section B to identify an individual.
   * Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit: Board of Supervisors
      Number of Ticket(s)/Pass(es): 2
      Describe the public purpose made pursuant to the agency’s policy
      Per Ticket Policy 5.3(k)

   B. Name of (Last, First)
      Number of Ticket(s)/Pass(es)
      Identify one of the following:
      Ceremonial Role ☐ Other ☐ Income ☐
      If checking “Ceremonial Role” or “Other” describe below:
      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 18944.1 and 18942. I have verified that the distribution set forth above is in accordance with the requirements.
   Yolanda Valadez
   Ticket Administrator
   Signature of Agency Head or Designee
   Print Name
   Title
   (Month, Day, Year)
   Comment:

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

1. Agency Name
County of Los Angeles

Division, Department, or Region (if applicable)
Board of Supervisors, 3rd District

Designated Agency Contact (Name, Title)
Yolanda Valadez, Ticket Administrator

Area Code/Phone Number          E-mail
213 974-3333          yvaladez@bos.lacounty.gov

Date Stamp
California Form 802
For Official Use Only

2. Function or Event Information
Does the agency have a ticket policy? [Yes][No]  
Face Value of Each Ticket/Pass $40.00

Event Description: [Dodgers Tickets]

Date(s): 4/15/15

Ticket(s)/Pass(es) provided by agency? [Yes][No]  
Name of Source: Los Angeles Dodgers

Was ticket distribution made at the behest of agency official? [Yes][No]

3. Recipients
* Use Section A to identify the agency's department or unit.  
  * Use Section B to identify an individual.  
  * Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board of Supervisors</td>
<td>2</td>
<td>Per Ticket Policy 5.3(k)</td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 18044.4 and 18044.4. I have verified that the distribution set forth above is in accordance with the requirements.

Signature of Agency Head or Designee: Yolanda Valadez
Print Name: Ticket Administrator
Title: (Month, Day, Year) 5/29/15

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

### 1. Agency Name
- County of Los Angeles
- Board of Supervisors, 3rd District
- Yolanda Valadez, Ticket Administrator

### 2. Function or Event Information
- **Event Description**: Dodgers Tickets
- **Face Value of Each Ticket/Pass**: $40.00
- **Date(s)**: 4/17/15
- **Ticket(s)/Pass(es) provided by agency?**: No
- **Was ticket distribution made at the behest of agency official?**: No

### 3. Recipients
- **Board of Supervisors**
  - Number of Ticket(s)/Pass(es): 2
  - Describe the public purpose made pursuant to the agency's policy: Per Ticket Policy 5.3(k)

### 4. Verification
- Yolanda Valadez
- Ticket Administrator
- 5/29/15

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

1. **Agency Name**
   - County of Los Angeles

2. **Function or Event Information**
   - **Event Description:** Dodgers Tickets
   - **Date(s):** 4/18/15
   - **Face Value of Each Ticket/Pass:** $40.00

3. **Recipients**
   - **Board of Supervisors**
     - **Number of Ticket(s)/Pass(es):** 2
     - **Description:** Per Ticket Policy 5.3(k)

4. **Verification**
   - **Signature of Agency Head or Designee:** Yolanda Valadez
   - **Title:** Ticket Administrator
   - **Date:** 5/29/15

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

### 1. Agency Name

County of Los Angeles

Division, Department, or Region (if Applicable)
Board of Supervisors, 3rd District

Designated Agency Contact (Name, Title)
Yolanda Valadez, Ticket Administrator

Area Code/Phone Number | E-mail
---|---
213 974-3333 | yvaladez@bos.lacounty.gov

### 2. Function or Event Information

Does the agency have a ticket policy? **Yes**

Event Description: **Dodger Tickets**

Face Value of Each Ticket/Pass $40.00

Date(s) 4/27/15

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

Was ticket distribution made at the behest of agency official? **No**

### 3. Recipients

- Use Section A to identify the agency's department or unit.
- Use Section B to identify an individual.
- Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board of Supervisors</td>
<td>2</td>
<td>Per Ticket Policy 5.3(k)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
</table>

- Ceremonial Role
- Other
- Income

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

<table>
<thead>
<tr>
<th>Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
</table>

### 4. Verification

I have read and understand FPPC Regulations 18944.1 and 18946. I have verified that the distribution set forth above is in accordance with the requirements:

Yolanda Valadez, Ticket Administrator

Signature of Agency Head & Designee: [Signature]
Print Name: [Print Name]
Title: [Title]

Date: 5/29/15

Comment:

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

1. Agency Name
   County of Los Angeles
   Board of Supervisors, 3rd District
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number: 213 974-3333
   E-mail: yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes [ ] No [X]
   Event Description: Dodger Tickets
   Face Value of Each Ticket/Pass $40.00
   Date(s): 4/28/15
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [X]
   Was ticket distribution made at the behest of agency official? No [X] Yes [ ]

3. Recipients
   Use Section A to identify the agency's department or unit.
   Use Section B to identify an individual.
   Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit:
   Number of Ticket(s)/Pass(es):
   Describe the public purpose made pursuant to the agency's policy:
   Board of Supervisors 2 Per Ticket Policy 5.3(k)

   B. Name of Individual (Last, First):
   Number of Ticket(s)/Pass(es):
   Identify one of the following:
   Ceremonial Role [ ] Other [ ] Income [ ]
   If checking "Ceremonial Role" or "Other" describe below:
   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 18644.1 and 18949. I have verified that the distribution set forth above is in accordance with the requirements.

   Signature of Agency Head or Designee: Yolanda Valadez
   Print Name: Ticket Administrator
   Title: S/29/15
   (Month, Day, Year)

Comment:

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

1. Agency Name
   County of Los Angeles
   Board of Supervisors, 3rd District
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number: 213 974-3333
   E-mail: yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? [ ] Yes □ No □
   Event Description: Dodger Tickets
   Face Value of Each Ticket/Pass: $40.00
   Date(s): 4/29/15
   If no: Los Angeles Dodgers
   Return of Source:
   Was ticket distribution made at the behest of agency official? [ ] No □ Yes □
   If yes: Official's Name (Last, First)

3. Recipients
   * Use Section A to identify the agency's department or unit.
   * Use Section B to identify an Individual.
   * Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency’s policy
   Board of Supervisors | 2 | Per Ticket Policy 5.3(k)

   B. Name of Individual(s) (Last, First) | Number of Ticket(s)/Pass(es) | Identify one of the following:
   Ceremonial Role □ Other □ Income □
   [If checking "Ceremonial Role" or "Other" describe below:]

   C. Name of Outside Organization (Include address and description) | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency’s policy

4. Verification
   I have read and understand FPPC Regulations 18244.1 and 18942. I have verified that the distribution set forth above is in accordance with the requirements.

   Signature of Agency Head or Designee: Yolanda Valadez | Print Name: Ticket Administrator | Title: (Month, Day, Year) 4/29/15

   Comment:

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

1. Agency Name
County of Los Angeles
Division, Department, or Region (if Applicable)
Board of Supervisors, 3rd District
Designated Agency Contact (Name, Title)
Yolanda Valadez, Ticket Administrator
Area Code/Phone Number, E-mail
213 974-3333 yvaladez@bos.lacounty.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes [ ] No [x]
Face Value of Each Ticket/Pass $40.00
Event Description [ ]
Provide Title/Explanation [ ]
Date(s) [ ]
Event(s)/Pass(es) provided by agency? Yes [ ] No [x]
If no: Los Angeles Dodgers
Names of Sources [ ]
Was ticket distribution made at the behest of agency official? No [x] Yes [ ]
If yes: [ ]
Official's Name (Last, First) [ ]

3. Recipients
* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board of Supervisors</td>
<td>2</td>
<td>Per Ticket Policy 5.3(k)</td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 16344.1 and 18942. I have verified that the distribution set forth above is in accordance with the requirements:

Signature of Agency Head or Designee [ ]
Print Name [ ]
Title [ ]
Month, Day, Year [S 11 15]

Comment [ ]

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

1. Agency Name
County of Los Angeles
Division, Department, or Region (If Applicable)
Board of Supervisors, 3rd District
Designated Agency Contact (Name, Title)
Yolanda Valadez, Ticket Administrator
Area Code/Phone Number E-mail
213 974-3333 yvaladez@bos.lacounty.gov

2. Function or Event Information

Does the agency have a ticket policy? Yes ☑ No ☐

Event Description: **Dodger Tickets**

Face Value of Each Ticket/Pass $40.00

Date(s) 5/12/15

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

Was ticket distribution made at the behest of agency official? Yes ☑ No ☐

3. Recipients

* Use Section A to identify the agency's department or unit.  * Use Section B to identify an individual.  * Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board of Supervisors</td>
<td>2</td>
<td>Per Ticket Policy 5.3(k)</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
</table>

4. Verification

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

Yolanda Valadez Ticket Administrator

Signature: __________ Name: __________________________ Title: __________________________ (Month, Day, Year)

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

1. Agency Name
   County of Los Angeles

Division, Department, or Region (if Applicable)
   Board of Supervisors, 3rd District

Designated Agency Contact (Name, Title)
   Yolanda Valadez, Ticket Administrator

Area Code/Phone Number   E-mail
   213 974-3333   yvaladez@bos.lacounty.gov

A Public Document  California Form 802

Date Stamp

For Official Use Only

Amendment (Must provide explanation in Part 3)
Date of Original Filing:
(Month, Day, Year)

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☐ No ☐
   Face Value of Each Ticket/Pass $ 40.00
   Event Description: Dodgers Tickets
   Provide Title/Explaination
   Date(s) 5/13/15

   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐
   If no: Los Angeles Dodgers
   Name of Source

   Was ticket distribution made at the behest of agency official? Yes ☐ No ☐
   If yes: Official's Name (Last, First)

3. Recipients
   * Use Section A to identify the agency's department or unit.  * Use Section B to identify an individual.  * Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit   Number of Ticket(s)/Pass(es)   Describe the public purpose made pursuant to the agency's policy
      Board of Supervisors   2   Per Ticket Policy 5.3(k)

   B. Name of Individual (Last, First)   Number of Ticket(s)/Pass(es)   Identify one of the following:
      Ceremonial Role ☐ Other ☐ Income ☐
      If checking "Ceremonial Role" or "Other" describe below:
      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 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
   Yolanda Valadez
   Ticket Administrator
   (Month, Day, Year) 5/29/15

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

1. Agency Name
County of Los Angeles
Division, Department, or Region (if Applicable)
Board of Supervisors, 3rd District
Designated Agency Contact (Name, Title)
Yolanda Valadez, Ticket Administrator
Area Code/Phone Number E-mail
213 974-3333 yvaladez@bos.lacounty.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes [x] No [ ]

Event Description [Dodgers Tickets]
Face Value of Each Ticket/Pass $ 40.00
Date(s) 5/14/15
Ticket(s)/Pass(es) provided by agency? Yes [ ] No [x]
Was ticket distribution made at the behest of agency official? No [x] Yes [ ]

3. Recipients
* Use Section A to identify the agency's department or unit. * Use Section B to identify an Individual. * Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency's policy
---|---|---
Board of Supervisors | 2 | Per Ticket Policy 5.3(k)

B. Name of Individual (Last, First) | Number of Ticket(s)/Pass(es) | Identify one of the following:
---|---|---
Ceremonial Role [ ] Other [ ] Income [ ]
If checking "Ceremonial Role" or "Other" describe below:
---|---|---

C. Name of Outside Organization (Include address and description) | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency's policy
---|---|---

4. Verification
I have read and understand FPPC Regulations 18444.1 and 18442. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee: Yolanda Valadez
Print Name: Ticket Administrator
Title: 5/29/15

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

1. Agency Name
County of Los Angeles
Division, Department, or Region (if Applicable)
Board of Supervisors, 3rd District
Designated Agency Contact (Name, Title)
Yolanda Valadez, Ticket Administrator
Area Code/Phone Number E-mail
213 974-3333 yvaladez@bos.lacounty.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No ☐
Event Description
Face Value of Each Ticket/Pass $40.00
Date(s) 5/15/15
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
Was ticket distribution made at the behest of agency official? No ☑ Yes ☐
If no: Los Angeles Dodgers
Name of Source
If yes: Official's Name (Last, First)

3. Recipients
* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.
A. Name of Agency, Department or Unit: Number of Ticket(s)/Pass(es): Describe the public purpose made pursuant to the agency's policy:
Board of Supervisors 2 Per Ticket Policy 5.3(k)

B. Name of Individual (Last, First): Number of Ticket(s)/Pass(es): Identify one of the following:
Ceremonial Role ☐ Other ☐ Income ☐
If checking "Ceremonial Role" or "Other" describe below:

C. Name of Outside Organization (Include address and description): Number of Ticket(s)/Pass(es): Describe the public purpose made pursuant to the agency's policy:

4. Verification
I have read and understand FPPC Regulations 16244.1 and 16242. I have verified that the distribution set forth above is in accordance with the requirements.

Signature of Agency Head or Designee Yolanda Valadez Ticket Administrator 5/12/15
Title Print Name (Month, Day, Year)

Comment:

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

## 1. Agency Name
County of Los Angeles

Division, Department, or Region (if Applicable)
Board of Supervisors, 3rd District

Designated Agency Contact (Name, Title)
Yolanda Valadez, Ticket Administrator

Area Code/Phone Number E-mail
213 974-3333 yvaladez@bos.lacounty.gov

## 2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No ☐

Event Description: **Snake Charmer**

Face Value of Each Ticket/Pass: **$50.00**

Date(s): **5/17/15**

Was ticket distribution made at the behest of agency official? Yes ☑ No ☑

If yes: [Signature]

## 3. Recipients
* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

### A. Name of Agency, Department or Unit

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board of Supervisors</td>
<td>2</td>
<td>Per Ticket Policy 5.3(k)</td>
</tr>
</tbody>
</table>

### B. Name of Individual

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yolanda Valadez</td>
<td>2</td>
<td>Ceremonial Role ☑ Other ☐ Income ☐</td>
</tr>
</tbody>
</table>

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

### C. Name of Outside Organization (Include address and description)

<table>
<thead>
<tr>
<th>Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
</table>

## 4. Verification
I have read and understand FPPC Regulations 19944.1 and 19944. I have verified that the distribution set forth above is in accordance with the requirements.

[Signature] Yolanda Valadez Ticket Administrator [Signature] [Print Name] [Title]

Comment:

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

1. Agency Name
County of Los Angeles

Division, Department, or Region (if Applicable)
Board of Supervisors, 3rd District

Designated Agency Contact (Name, Title)
Yolanda Valadez, Ticket Administrator

Area Code/Phone Number E-mail
213 974-3333 yvaladez@bos.lacounty.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No ☐

Event Description
Dodgers Tickets

Face Value of Each Ticket/Pass $40.00

Date(s)
5/22/15

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

Was ticket distribution made at the behest of agency official? Yes ☐ No ☑

If yes: Los Angeles Dodgers

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

Board of Supervisors | 2 | Per Ticket Policy 5.3(k)

B. Name of individual (Last, First) | Number of Ticket(s)/Pass(es) | Identify one of the following:

Ceremonial Role ☑ Other ☐ Income ☑

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

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 understood FPPC Regulations 10944.1 and 10942. I have verified that the distribution set forth above is in accordance with the requirements.

Signature of Agency Head or Designee: Yolanda Valadez
Print Name: Ticket Administrator
Title: 5/22/15

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

1. Agency Name
   County of Los Angeles

   Division, Department, or Region (if Applicable)
   Board of Supervisors, 3rd District

   Designated Agency Contact (Name, Title)
   Yolanda Valadez, Ticket Administrator

   Area Code/Phone Number  E-mail
   213 974-3333  yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy?  Yes [x]  No [ ]
   Event Description [Dodger Tickets]
   Face Value of Each Ticket/Pass $40.00
   Date(s)  5/23/15
   Ticket(s)/Pass(es) provided by agency?  Yes [x]  No [ ]
   Was ticket distribution made at the behest of agency official?  Yes [x]  No [ ]
   If yes:
   Name of Source [Los Angeles Dodgers]
   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:  
      Board of Supervisors
      Number of Ticket(s)/Pass(es)  2
      Describe the public purpose made pursuant to the agency's policy:
      Per Ticket Policy 5.3(k)

   B. Name of Individual
      (Last, First)
      Number of Ticket(s)/Pass(es)
      Identify one of the following:
      Ceremonial Role [ ]  Other [ ]  Income [ ]
      If checking "Ceremonial Role" or "Other" describe below:
      Ceremonial Role [ ]  Other [ ]  Income [ ]
      If checking "Ceremonial Role" or "Other" describe below:
      Ceremonial Role [ ]  Other [ ]  Income [ ]
      If checking "Ceremonial Role" or "Other" describe below:

   C. Name of Outside Organization
      (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 18944.1 and 18942. I have verified that the distribution set forth above is in accordance with the requirements
   Signature of Agency Head or Designee
   Yolanda Valadez  Ticket Administrator
   (Month, Day, Year)  5/29/15
   Comment:

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

1. Agency Name
   County of Los Angeles

Division, Department, or Region (If Applicable)
Board of Supervisors, 3rd District

Designated Agency Contact (Name, Title)
Yolanda Valadez, Ticket Administrator

Area Code/Phone Number E-mail
213 974-3333 yvaladez@bos.laounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes [x] No [x]
   Face Value of Each Ticket/Pass $40.00
   Event Description: Dodgers Tickets
   Date(s) 5/24/15
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [x]
   Name of Source: Los Angeles Dodgers
   Was ticket distribution made at the behest of agency official? Yes [x] No [x]
   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
      Board of Supervisors 2 Per Ticket Policy 5.3(k)

   B. Name of Individual
      Number of Ticket(s)/Pass(es)
      Identify one of the following:
      Ceremonial Role [ ] Other [x]
      Income [ ]
      If checking "Ceremonial Role" or "Other" describe below:
      Ceremonial Role [ ] Other [ ]
      Income [ ]
      If checking "Ceremonial Role" or "Other" describe below:

   C. Name of Outside Organization
      (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 18944.1 and 18942. I have verified that the distribution set forth above is in accordance with the requirements:

   Signature of Agency Head or Designee
   Yolanda Valadez
   Print Name
   Ticket Administrator
   Title
   (Month, Day, Year) 5/29/15

Comment:

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

1. Agency Name
   County of Los Angeles
   Board of Supervisors, 3rd District
   Yolanda Valadez, Ticket Administrator
   213 974-3333  yvaladez@bos.lacounty.gov
   Date Stamp
   California Form 802
   For Official Use Only
   Amendment (Must provide explanation in Part 3)
   Date of Original Filing: 

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☐ No X
   Event Description: Dodgers Tickets
   Face Value of Each Ticket/Pass $40.00
   Date(s): 5/25/15
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No X
   If no: Los Angeles Dodgers
   Name of Source:
   Was ticket distribution made at the behest of agency official? No ☐ Yes X
   If yes: 
   Official's Name (Last, First):

3. Recipients
   • Use Section A to identify the agency's department or unit.
   • Use Section B to identify an individual.
   • Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency's policy
   Board of Supervisors | 2 | Per Ticket Policy 5.3(k)

   B. Name of Individual (Last, First) | Number of Ticket(s)/Pass(es) | Identify one of the following:
   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 18044.1 and 19042. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head or Designee
   Yolanda Valadez  Ticket Administrator
   Print Name  Title
   (Month, Day, Year)
   Comment:

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

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if Applicable)
   Board of Supervisors, 3rd District
   Designated Agency Contact (Name, Title)
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number
   213 974-3333
   E-mail
   yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $ 40.00
   Event Description
   Dodgers Tickets
   Date(s) 5/26/15
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   If no: Los Angeles Dodgers
   Was ticket distribution made at the behest of agency official? No ☐ Yes ☒
   If yes: Official's Name (Last, First)

3. Recipients
   * Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy
      Board of Supervisors 2 Per Ticket Policy 5.3(k)

   B. Name of Individual
      Number of Ticket(s)/Pass(es)
      Identify one of the following:
      Ceremonial Role ☐ Other ☐ Income ☐
      If checking "Ceremonial Role" or "Other" describe below:

   C. Name of Outside Organization
      (Include address and description)
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18945. I have verified that the distribution set forth above is in accordance with the requirements:
   Signature of Agency Head or Designee:
   Yolanda Valadez
   Ticket Administrator
   Print Name:
   Title:
   Date (Month, Day, Year) 5/29/15
   Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Name: County of Los Angeles
Division, Department, or Region (if Applicable): Board of Supervisors, 3rd District
Designated Agency Contact (Name, Title): Yolanda Valadez, Ticket Administrator
Area Code/Phone Number: 213 974-3333
E-mail: yvaladez@bos.lacounty.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☐ No ☑
Event Description: Dodgers Tickets
Face Value of Each Ticket/Pass: $40.00
Date(s): 5/23/15
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
Was ticket distribution made at the behest of agency official? No ☐ Yes ☑
Official's Name (Last, First):

3. Recipients
* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit: Board of Supervisors
Number of Ticket(s)/Pass(es): 2
Describe the public purpose made pursuant to the agency's policy: Per Ticket Policy 5.3(k)

B. Name of Individual (Last, First)
Number of Ticket(s)/Pass(es):
Identify one of the following:
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 understand FPPC Regulations 19344.1 and 19342. I have verified that the distribution set forth above, is in accordance with the requirements.

Yolanda Valadez
Ticket Administrator
5/29/15

Signature of Agency Head or Designee Print Name Title

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

1. Agency Name
   County of Los Angeles
   Board of Supervisors, 3rd District
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number: 213 974-3333
   E-mail: yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes\xmark No\ 
   Event Description: "Brahms with Boc", Date(s): 5/7/15
   Ticket(s)/Pass(es) provided by agency? Yes\xmark No\ 
   Was ticket distribution made at the behest of agency official? No\xmark Yes\ 
   Face Value of Each Ticket/Pass $: 99.00
   Name of Source: "Walt Disney Concert Hall"
   Official's Name (Last, First): LA Phil

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
      Board of Supervisors 2 Per Ticket Policy 5.3(k)

   B. Name of Individual
      Number of Ticket(s)/Pass(es)
      Identify one of the following:
      Ceremonial Role Other Income
      If checking "Ceremonial Role" or "Other" describe below:

   C. Name of Outside Organization
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy
      Griffith Park Adult Community Center 2 Raffle/Silent Auction

4. Verification
   I have read and understand FPPC Regulations 18744.1 and 18942. I have verified that the distribution set forth above is in accordance with the requirements.

   Yolanda Valadez Ticket Administrator
   Signature of Agency Head or Designee Title
   Month, Day, Year

   Comment:

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

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (If Applicable)
   Board of Supervisors, 3rd District
   Designated Agency Contact (Name, Title)
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number E-mail
   213 974-3333 yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $ 108.00
   Event Description BRIGHT WALT DISNEY CONCERT HALL
   Date(s) 5/19/15
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   If no: WALT DISNEY CONCERT HALL
   Official's Name (Last, First)
   Was ticket distribution made at the behest of agency official? No ☐ Yes ☒

3. Recipients
   • Use Section A to Identify the agency's department or unit. • Use Section B to Identify an individual. • Use Section C to Identify an outside organization.
   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Pass(es) Describe the public purpose made pursuant to the agency's policy
      Board of Supervisors 2 Per Ticket Policy 5.3(k)

   B. Name of Individual (Last, First)
      Number of Ticket(s)/Pass(es) Identify one of the following:
      Ceremonial Role ☐ Other ☐ Income ☐
      If checking "Ceremonial Role" or "Other" describe below:
      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 18644.1 and 18649. I have verified that the distribution set forth above is in accordance with the requirements.

   Signature of Agency Head or Designee Print Name Title
   Yolanda Valadez Ticket Administrator 5/29/15
   (Month, Day, Year)
   Comment:

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

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (If Applicable)
   Board of Supervisors, 3rd District
   Designated Agency Contact (Name, Title)
   Yolanda Valadez, Ticket Administrator
   Area Code/Phone Number: 213 974-3333
   E-mail: yvaladez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes [x] No [ ]
   Face Value of Each Ticket/Pass $208.00
   Event Description: Fuego y Flamenco
   Date(s) 5/21/15
   Ticket(s)/Pass(es) provided by agency? Yes [x] No [ ]
   If no:
   Name of Source:
   Disney Concert Hall
   Was ticket distribution made at the behest of agency official? Yes [x] No [ ]
   If yes:
   Official's Name (Last, First)

3. Recipients
   * Use Section A to identify the agency's department or unit.
   * Use Section B to identify an individual.
   * Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy
      Board of Supervisors 2
      Per Ticket Policy 5.3(k)

   B. Name of Individual
      Number of Ticket(s)/Pass(es)
      Identify one of the following:
      Ceremonial Role [x] Other [ ]
      If checking "Ceremonial Role" or "Other" describe below:
      Other [ ]
      Ceremonial Role [ ] Other [ ]
      Income [ ]
      Ceremonial Role [ ] Other [ ]
      Income [ ]

   C. Name of Outside Organization
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy
      (Include address and description)

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.
   Yolanda Valadez
   Signature of Agency Head or Designee
   Ticket Administrator
   Print Name
   Title
   (Month, Day, Year)
   Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 855/ASK-FPPC (855/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
County of Los Angeles
Division, Department, or Region (If Applicable)
Board of Supervisors, 3rd District
Designated Agency Contact (Name, Title)
Yolanda Valadez, Ticket Administrator
Area Code/Phone Number 213 974-3333
E-mail yvaladez@bos.lacounty.gov

Date Stamp

2. Function or Event Information
Does the agency have a ticket policy? Yes[X] No[]
Face Value of Each Ticket/Pass $ 85.00
Event Description Immediate Family
Provide Title/Explanation
Date(s) 5/23/15
Ticket(s)/Pass(es) provided by agency? Yes No[X]
If no: Mark Tatum Ford
Name of Source
Was ticket distribution made at the behest of agency official? No[X] Yes[]
If yes:
Official's Name (Last, First)

3. Recipients
* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit Number of Ticket(s)/Pass(es) Describe the public purpose made pursuant to the agency's policy
Board of Supervisors 2 Per Ticket Policy 5.3(k)

B. Name of Individual (Last, First) Number of Ticket(s)/Pass(es) Identify one of the following:
Ceremonial Role Other[] Income
If checking "Ceremonial Role" or "Other" describe below:

C. Name of Outside Organization (Include address and description) Number of Ticket(s)/Pass(es) Describe the public purpose made pursuant to the agency's policy

4. Verification
I have read and understand FPPC Regulations 18544.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Yolanda Valadez
Ticket Administrator

Signature of Agency Head or Designee
Print Name Title
(Month, Day, Year)

Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 855/ASK-FPPC (855/275-7772)
**Agency Report of:**

**Ceremonial Role Events and Ticket/Pass Distributions**

**1. Agency Name**
- County of Los Angeles

**Division, Department, or Region (If Applicable)**
- Board of Supervisors, 3rd District

**Designated Agency Contact (Name, Title)**
- Yolanda Valadez, Ticket Administrator

**Area Code/Phone Number**
- 213.974-3333

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

**Date of Original Filing:**

**2. Function or Event Information**
- **Yes**

**Event Description**
- Matilda

**Face Value of Each Ticket/Pass**
- $150.00

**Date(s)**
- 5/31/15

**Ticket(s)/Pass(es) provided by agency?**
- **No**

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

**Name of Source**
- Ahmanson Theatre

**Official's Name (Last, First)**

**3. Recipients**
- Use Section A to identify the agency's department or unit.
- Use Section B to identify an individual.
- Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board of Supervisors</td>
<td>2</td>
<td>Per Ticket Policy 5.3(k)</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
</table>

**4. Verification**
- I have read and understand FPPC Regulations 19844.1 and 19842. I have verified that the distribution set forth above is in accordance with the requirements.

**Signature of Agency Head or Designee**
- Yolanda Valadez

**Print Name**
- Ticket Administrator

**Title**
- (Month, Day, Year)

**Comment:**

FPPC Form 802 (4/12)

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)