Tickets Provided by Agency Report

1. Agency Name
   Los Angeles County

   Division, Department, or Region (if applicable)
   Board of Supervisors - First District

   Street Address
   500 West Temple Street, Suite 856, Los Angeles, CA 90012

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

   Agency Contact (name and title)
   Joanie Paul - Ticket Administrator

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 06/03/10
   Description of Event: Los Angeles Dodger Tickets
   Face Value of Ticket: $50.00
   Agency Event: No
   Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles Dodgers
   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)

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
</tr>
</thead>
<tbody>
<tr>
<td>(Last, First)</td>
<td></td>
</tr>
</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

   Name of Behesting Agency Official: Supervisor Gloria Molina

   Name of individual or Organization: Clifford Hanson - City of Bell Gardens

   Description of Organization: Provides services to constituents of Bell Gardens

   Address of Organization:
   7100 South Garfield Avenue
   Bell Gardens CA 90201

   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   5.3 h) Promote public and private facilities for County resident use.

5. Verification

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

   Joanie Paul
   Ticket Administrator
   05/20/10

   Signature of Agency Head or Designee
   Print Name
   Title

   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
Los Angeles County
Division, Department, or Region (if applicable)
Board of Supervisors - First District
Street Address
500 West Temple Street, Suite 856, Los Angeles, CA 90012
Area Code/Phone Number
(213) 974-4111
E-mail
Molina@lacbos.org
Agency Contact (name and title)
Joanie Paul - Ticket Administrator

Date Stamp

 Amendment (Most explain in Part 5.)
Date of Original Filing: ___/___/______ (month, day, year)

2. Event For Which Tickets Were Distributed
Date(s) of Event: 06/01/10
Description of Event: Los Angeles Dodger Tickets
Face Value of Ticket: $50.00
Agency Event
☐ Yes
☒ No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency:
Los Angeles Dodgers
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>
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<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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</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Supervisor Gloria Molina
Name of Behesting Agency Official:
Roland Rebollo - South El Monte Sr. Ctr.
Name of Individual or Organization:
Provides services to seniors.
Address of Organization:
1556 Central Avenue
South El Monte
CA
91733
Number and Street
City
State
Zip Code

Number of Tickets: 2
Description of Organization: Provides services to seniors.
Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
5.3 h) Promote public and private facilities for County resident use.

5. Verification
I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.
Joanie Paul
Ticket Administrator
05/20/10

Signature of Agency Head or Designee
Print Name
Title

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

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

**Agency Name**
Los Angeles County

**Division, Department, or Region (if applicable)**
Board of Supervisors - First District

**Street Address**
500 West Temple Street, Suite 856, Los Angeles, CA 90012

**Area Code/Phone Number**
(213) 974-4111

**E-mail**
Molina@lacbos.org

**Agency Contact (name and title)**
Joanie Paul - Ticket Administrator

**Date Stamp**

**TICKETS PROVIDED BY AGENCY REPORT**

**Date of Original Filing:** (month, day, year)

**California Form 802**
For Official Use Only

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2. **Event For Which Tickets Were Distributed**

**Date(s) of Event:** 06/02/10

**Description of Event:** Los Angeles Dodger Tickets

**Face Value of Ticket:** $50.00

**Agency Event**
- [ ] Yes
- [x] No (Identify source of tickets below.)

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

**Number of Tickets Received:** 2

**Ticket(s) Provided to Agency:**

- [x] Gratuitously
- [ ] Pursuant to Contract

---

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

<table>
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<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
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4. **Individual or Organization Receiving Ticket(s)** (Provided at the behest of an agency official.)

**Name of Behesting Agency Official:** Supervisor Gloria Molina

**Name of Individual or Organization:** Moe Miller - City of Azusa Senior Center

**Number of Tickets:** 2

**Description of Organization:** Provides services to seniors.

**Address of Organization:**

- **740 North Dalton Avenue**
- **Azusa**, **CA** 91702

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

- [ ] 5.3 h) Promote public and private facilities for County resident use.

---

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):** 05/20/10

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FPPC Form 362 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Tickets Provided by Agency Report

A Public Document

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

Street Address
500 West Temple Street, Suite 856, Los Angeles, CA 90012

Area Code/Phone Number
(213) 974-4111

E-mail
Molina@lacbos.org

Agency Contact (name and title)
Joanie Paul - Ticket Administrator

Date Stamp

California Form 802
For Official Use Only

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

2. Event For Which Tickets Were Distributed

Date(s) of Event: 06/09/10

Description of Event: Los Angeles Dodger Game

Face Value of Ticket: $50.00

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

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

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)

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4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Supervisor Gloria Molina

Name of Individual or Organization: Christina Valenzuela

Number of Tickets: 2

Description of Organization:

Address of Organization:
15900 East Main Street
La Puente, CA 91744

State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
5.3h) Promoting public and private facilities available for County resident use.

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
Joanie Paul
Ticket Administrator

Print Name

Title

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

FPPC Form 852 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Tickets Provided by
Agency Report

1. Agency Name
   Los Angeles County
   Board of Supervisors - First District

Street Address
   500 West Temple Street, Suite 856, Los Angeles, CA 90012

Area Code/Phone Number
   (213) 974-4111

E-mail
   Molina@lacbos.org

Agency Contact (name and title)
   Joanie Paul - Ticket Administrator

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 06/13/10
   Description of Event: Los Angeles Dodger Game
   Face Value of Ticket: $50.00

Agency Event
   ☒ Yes  ☐ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles Dodgers
   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

4. Individual or Organization Receiving Ticket(s)
   (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: Supervisor Gloria Molina
   Name of Individual or Organization: Raul Elenes - Commerce Sr. Citizen Comm.
   Number of Tickets: 2
   Description of Organization: Organization assisting Senior Citizens.
   Address of Organization: 15900 East Main Street, La Puente, CA 91744

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: [Signature]
   Print Name
   Title
   Date (month, day, year)

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
   Los Angeles County
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   Molina@lacbos.org
   Agency Contact (name and title)
   Joanie Paul - Ticket Administrator

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 06/13/10
   Description of Event: Los Angeles Dodger Game
   Face Value of Ticket: $50.00
   Agency Event
   □ Yes
   □ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency:
   Los Angeles Dodgers
   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)

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4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Requesting Agency Official:
   Supervisor Gloria Molina
   Name of Individual or Organization:
   Raul Elenes - Commerce Sr. Citizen Comm.
   Description of Organization:
   Organization providing assistance to senior citizens.
   Address of Organization:
   2555 Commerce Way
   Commerce
   CA
   90040
   Number of Tickets: 2
   Purpose for Distribution:
   (Describe the public purpose for the distribution to the organization.)
   5.3i) Support community organizations that benefit County residents.

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18644.1.
   Joanie Paul
   Ticket Administrator
   05/25/10
   Signature of Agency Head or Designee
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)

FPPC Form 852 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)