Tickets Provided by
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

1. Agency Name
2. Event For Which Tickets Were Distributed
Date(s) of Event: 4/25/10
Description of Event: Concert performed at Walt Disney Concert Hall
Face Value of Ticket: $93.00
Agency Event [X] 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 [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:</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
Ticket Administrator
06/28/2010
(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

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 4/03/10
   Description of Event: Concert performed at Ahmanson Theatre
   Face Value of Ticket: $75.00
   Agency Event: Yes  No
   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: (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>Lorj Wheeler</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
   06/28/2010

   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

2. **Division, Department, or Region (if applicable)**
   - Board of Supervisors, Third District

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

4. **Area Code/Phone Number**
   - 213-974-3333

5. **E-mail**
   - lirangel@bos.lacounty.gov

6. **Agency Contact (name and title)**
   - Liz Rangel

7. **Date(s) of Event:**
   - 4/30/10

8. **Description of Event:**
   - Concert performed at Walt Disney Concert Hall

9. **Face Value of Ticket:**
   - $93.00

10. **Agency Event:**
    - Yes

11. **Name of Outside Source of Ticket(s) Provided to Agency:**
    - Los Angeles Philharmonic

12. **Number of Tickets Received:**
    - 2

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

   | Name of Official | Number of Tickets | State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution |
---|------------------|-------------------|--------------------------------------------------------------------------------------------------|
   | Lourdes Arevalo  | 2                 | Retaining highly qualified county employees                                                     |

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

   | Name of Individual or Organization | Number of Tickets |
---|-----------------------------------|-------------------|

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

   **Title:**
   - Ticket Administrator

   **Date:**
   - 05/28/2010

   **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
   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: 5/06/10
   Description of Event: Concert performed 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>Virginia 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 PPJC Regulation 18944.1.

Liz Rangel
   Signature of Agency Head or Designee

Liz Rangel
   Print Name

Ticket Administrator
   Title

06/28/2010
   (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
   County of Los Angeles
   Division, Department, or Region (if applicable)
   Board of Supervisors, Third District
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   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: 5/16/10
   Description of Event: Concert performed at Walt Disney Concert Hall
   Face Value of Ticket: $96.50
   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>Regina Marquez</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
   06/28/2010
   Title
   (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)

FPPC Form 832 (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  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: 5/21/10  Description of Event: Dodger game
   Face Value of Ticket: $60.00
   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:  No

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>Lisa Garcia</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  Print Name  Title  Date
   Liz Rangel  Ticket Administrator  06/28/2010

   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
- 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:** 5/29/10
- **Description of Event:** Concert performed at Ahmanson Theatre
- **Face Value of Ticket:** $75.00

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

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

**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:**
- **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:** 06/28/2010

**Print Name:** Ticket Administrator

**Title:** 06/28/2010

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