Agencies 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 Valdez, Ticket Administrator
   Area Code/Phone Number: 213 974-3333
   E-mail: yvaldez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes [X] No [ ]
   Face Value of Each Ticket/Pass $130
   Event Description: An Act of 60
   Date(s): 3/5/16
   If no: Ahamman Theatre
   Ticket(s)/Pass(es) provided by agency? Yes [X] No [ ]
   If yes: Official's Name (Last, First)
   Was ticket distribution made at the behest of agency official? Yes [X] 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 | 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 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 Valdez
   Print Name: Ticket Administrator
   Title: Director
   Date (Month, Day, Year): 3/3/16

Comment: 

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 888/ASK-FPPC (888/276-7772)
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 $37.4
   Event Description Magic Flute
   Date(s) 3/6/16
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   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)
      Board of Supervisors 2
      Per Ticket Policy 5.3(k)

   B. Name of Individual (Last, First) Number of Ticket(s)/Pass(es)
      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 18924.1 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: 3/21/16
   (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: 213 974-3333
   E-mail: yvaladez@bos.lacounty.gov
   Date Stamp:

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass: $168
   Event Description: "Tuxedo Ball" Date(s): 3, 4, 16
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   If no: WDC H
   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
      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
      (E.g., Fleg)
      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 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:
   Date: 3/3/16
   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 [X] No [ ]
Face Value of Each Ticket/Pass $ 108
Event Description [Herbie Hancock Jazz]
Date(s) 3/18/16
Ticket(s)/Pass( es) provided by agency? Yes [X] No [ ]
If no: [ ]
If yes: [ ]
Name of Source
Was ticket distribution made at the behest of agency official? Yes [ ] No [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 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 purpose made pursuant to the agency's policy

4. Verification
I have read and understand FPPC Regulations 18244.4 and 18242. 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]
3/13/16 [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 $93
Ticket(s)/Pass(e)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: Board of Supervisors
      Number of Ticket(s)/Pass(es): 8
      Per Ticket Policy 5.3(k)

   B. Name of Individual (Last, First)
      Number of Ticket(s)/Pass(es)
      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: Yolanda Valadez
Title: Ticket Administrator
Date: 3/11/16

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 [X] No [ ]
   Face Value of Each Ticket/PASS $239
   Event Description: Madame Butterfly, Date(s) 3/20/10
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [X]
   If no: Dorothy Chandler Pavilion, 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:
---|---|---

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 18924.1 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
Print Name: Yolanda Valadez
Title: Ticket Administrator
Date (Month, Day, Year): 3/31/11

Comment:
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 [x] No [ ]
   - **Face Value of Each Ticket/Pass $** 168
   - **Event Description** La Santa Cecilia (Provide Title/Explanation)
   - **Date(s)** 3/24/15
   - **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**
   - Board of Supervisors
   - Number of Ticket(s)/Pass(es): 2
   - Per Ticket Policy 5.3(k)

   **B. Name of Individual (e.g., Finn)**
   - 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 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   - Signature of Agent, Head or Designee: Yolanda Valadez
   - Print Name: Ticket Administrator
   - Title: 3/11/16

   **Comment:** [ ]

   FPPC Form 802 (4/12)
   FPPC Toll-Free Helpline: 866/ASK-FPPC (866/276-7772)
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 $168
   Event Description: Jose Gonzalez
   Date(s) 3/11/16 3/11/16
   Ticket(s)/Pass(es) provided by agency? Yes[X] No[ ]
   If no: WOCH
   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 purpose made pursuant to the agency's policy
   Board of Supervisors 74 Per Ticket Policy 5.3(k)

   B. Name of Individual
      (Last, First) Number of Ticket(s)/Pass(es)
      Ceremonial Role[ ] Other[ ] Income[ ]
      Identify one of the following:
      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 purpose made pursuant to the agency's policy

4. Verification
   I have read and understand FPPC Regulations 18924.1 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
   3/11/16
   (Month, Day, Year)

Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/276-7772)