

**Tickets Provided by Agency Report**

**A Public Document**

TICKETS PROVIDED BY AGENCY REPORT

<b>1. Agency Name</b> County of Los Angeles		Date Stamp	<b>California Form 802</b> For Official Use Only
Division, Department, or Region (if applicable) Los Angeles County Arts Commission			
Street Address 1055 Wilshire Boulevard, Suite 800			
Area Code/Phone Number 213 202-5858	E-mail mgonzalez@arts.lacounty.gov	<input type="checkbox"/> Amendment (Must explain in Part 5.)	
Agency Contact (name and title) Miriam Gonzalez		Date of Original Filing: _____ (month, day, year)	

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

Date(s) of Event: 2 / 6 / 10 Description of Event: Cousin Bette  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 34.00

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

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

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
Laura Zucker	2	Policy No. 2.01.5.3b Job duties of the county official require his/her attendance at the event.

**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: \_\_\_\_\_

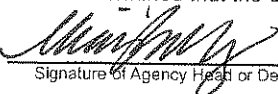
Description of Organization: \_\_\_\_\_

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)

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