**Agency Report of:**

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

<table>
<thead>
<tr>
<th>1. <strong>Agency Name</strong></th>
<th>County of Los Angeles</th>
</tr>
</thead>
<tbody>
<tr>
<td>Division, Department, or Region (If Applicable)</td>
<td>Board of Supervisors, 3rd District</td>
</tr>
<tr>
<td>Designated Agency Contact (Name, Title)</td>
<td>Yolanda Valadez, Ticket Administrator</td>
</tr>
<tr>
<td>Area Code/Phone Number</td>
<td>213 974-3333</td>
</tr>
<tr>
<td>E-mail</td>
<td><a href="mailto:yvaladez@bos.lacounty.gov">yvaladez@bos.lacounty.gov</a></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Date Stamp</th>
<th>California Form 802</th>
</tr>
</thead>
<tbody>
<tr>
<td>For Official Use Only</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. <strong>Function or Event Information</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the agency have a ticket policy?</td>
</tr>
<tr>
<td>Event Description</td>
</tr>
<tr>
<td>Face Value of Each Ticket/Pass</td>
</tr>
<tr>
<td>Date(s)</td>
</tr>
<tr>
<td>Ticket(s)/Pass(es) provided by agency?</td>
</tr>
<tr>
<td>If no:</td>
</tr>
<tr>
<td>Name of Source</td>
</tr>
<tr>
<td>If yes:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>3. <strong>Recipients</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>* 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.</td>
</tr>
</tbody>
</table>

<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></td>
<td></td>
<td></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>Ceremonial Role [ ] Other [ ] 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>
<tbody>
<tr>
<td>Crestwood Hills Park Senior Group/Homeowners Assn</td>
<td>25</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>4. <strong>Verification</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>I have read and understood FPPC Regulations 19244.1 and 19242. I have verified that the distribution set forth above, is in accordance with the requirements.</td>
</tr>
</tbody>
</table>

Yolanda Valadez [Signature]  
Ticket Administrator  
Print Name  8/13/11 |
Title  
(Month, Day, Year)  

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 ☐
   Event Description
   Face Value of Each Ticket/Pass $35
   Date(s): 6/28/15 7/16/15 8/14/15 9/11/15
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   Was ticket distribution made at the behest of agency official? Yes ☑ No ☐
   If yes: Hollywood Bowl
   Official’s Name (Last, First)

3. Recipients
   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency’s policy

   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:
      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
      JFS of LA SOVA 200
      Food and Resource Program

4. Verification
   I have read and understand FPPC Regulations 19444.1 and 19443. 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: 25 tickets to each concert.
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
Do the agency have a ticket policy? Yes [ ] No [X]
Event Description
Face Value of Each Ticket/Pass $35
Date(s) 7 9 15
Ticket(s)/Pass(es) provided by agency? Yes [ ] No [X]
If no: Hollywood Bowl
Name of Source
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

<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></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

B. Name of Individual

<table>
<thead>
<tr>
<th>Name of Individual</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Ceremonial Role [ ] Other [ ] Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role [ ] Other [ ] Identifying the following:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role [ ] Other [ ] Identifying the following:</td>
</tr>
</tbody>
</table>

C. Name of Outside Organization

<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>
<tbody>
<tr>
<td>Vista Del Mar 25</td>
<td></td>
<td>Social psych. child family svcs</td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 19844.1 and 19844.2. 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: Yolanda Valadez

Comment: 5 tickets 7/19/15, 10/7/19, 15, 5/13/15, 5/9/15
**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 $35

Event Description [Provide Title/Explanation]

Ticket(s)/Pass(es) provided by agency? Yes [ ] No [x]

Date(s) 6/28/15 7/19/15

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

If no: Hollywood Bowl

Name of Source

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></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Ceremonial Role</th>
<th>Other</th>
<th>Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>(last, first)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Ceremonial Role [ ] Other [ ] Income [ ]

If checking “Ceremonial Role” or “Other” describe below:

<table>
<thead>
<tr>
<th>Ceremonial Role</th>
<th>Other</th>
<th>Income</th>
</tr>
</thead>
</table>

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: 

Ticket Administrator: Yolanda Valadez

Print Name: 

Title: 

(Month, Day, Year) 8/31/15

Comment: 25 tickets to each concert.
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
   Does the agency have a ticket policy? Yes [x] No [ ]
   Face Value of Each Ticket/Pass $35
   Event Description: Provide Title/Explanation
   Date(s): 8/25/15
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [x]
   Hollywood Bowl
   If no: Hollywood Bowl
   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
   
   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 public purpose made pursuant to the agency's policy
   RUTH Youth Build 25 Youth Leadership Development

4. Verification
   I have read and understand FPPC Regulations 19946.1 and 19942. 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
   (Month, Day, Year) 8/3/15

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: 213 974-3333
   Email: 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 $35
   Event Description: [Provide Title/Explanation]
   Date(s) 7 14 15 8 25 15
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [X]
   If no: Hollywood Bowl
   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

      [Blank]

   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:

      [Blank]

   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

      The Guadalupe Center 50 youth/family programs, classes, tutoring

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18842. 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: [Blank]
   Date: 8/31/15
   (Month, Day, Year)

   Comment: 25 tickets to en. concert
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 $ 25
   Event Description
   [Provide Title/Explanation]
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑ If no: Hollywood Bowl
   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
      
      

   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 public purpose made pursuant to the agency's policy
      El Cariso Park 50 Community rooms & other amenities

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18642. 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 (Month, Day, Year)
   8/13/115

Comment: 25 tickets to use. consent.
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
   Amendment (Must provide explanation in Part 2)
   Date of Original Filing: (Month, Day, Year)

2. Function or Event Information
   Does the agency have a ticket policy? Yes [a] No [□]
   Face Value of Each Ticket/Pass $ 35
   Event Description
   Provide Title/Explanation
   Ticket(s)/Pass(es) provided by agency? Yes [□] No [a]
   Date(s) 7/16/15 8/25/15
   Was ticket distribution made at the behest of agency official? No [a] Yes [□]
   If yes: Hollywood Bowl
   Name of Source
   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
      | | |

   B. Name of Individual (Title, Position) | 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
      | | One generation so Adult daycare, senior enrichment, daycare, etc.

4. Verification
   I have read and understand FPPC Regulations 18044, 19 and 18842. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head or Designee
   Print Name
   Date (Month, Day, Year)
   Comment: 25 tickets to each concert.
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 □
   Event Description
   Provide Title/Explanation
   Ticket(s)/Pass(es) provided by agency? Yes □ No X
   Was ticket distribution made at the behest of agency official? No X Yes □
   Face Value of Each Ticket/Pass $ 35
   Date(s) 7/9/15 7/15/15
   If no: Hollywood Bowl
   Name of Source
   If yes: Official's Name (Last, First)

3. Recipients
   A. Name of Agency, Department or Unit
   Number of Ticket(s)/Pass(es)
   Describe the public purpose made pursuant to the agency's policy
   B. Name of Individual
   (Name, Title)
   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
   Alicia Brodous
   100 Multi Purpose Social Services Senior Center

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.
   Signature of Agency Head or Designee Yolanda Valadez
   Print Name Ticket Administrator
   Title
   Date 8/13/15
   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

2. Function or Event Information
   Does the agency have a ticket policy? Yes [x] No [ ]
   Event Description: [Provide Title/Explanation]
   Face Value of Each Ticket/Pass $35
   Date(s): 08/13/15
   Ticket(s)/Pass(es) provided by agency? Yes [x] No [ ]
   Was ticket distribution made at the behest of agency official? No [x] Yes [ ]
   If no: Hollywood Bowl
   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

   B. Name of Individual
      (Last, First)
      Number of Ticket(s)/Pass(es)
      Ceremonial Role [ ] Other [ ]
      If checking "Ceremonial Role" or "Other" describe below:
      Income [ ]
      Ceremonial Role [ ] Other [ ]
      If checking "Ceremonial Role" or "Other" describe below:
      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
      Cloud and Fire
      25 Education for low-income urban youth

4. Verification
   I have read and understand FPPC Regulations 19944.1 and 19942. 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)

Comment: 25 for 08/13/15 concert

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
A Public Document 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 $35
EVENT DESCRIPTION
Provide Title/Explanation
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
If no: Hollywood Bowl
Name of Source
Was ticket distribution made at the behest of agency official? Yes ☑ No ☐
If yes: Official’s Name (Last, First)

Date(s) 7 16 15 8 13 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.

A. Name of Agency, Department or Unit Number of Ticket(s)/Pass(es) Describe the public purpose made pursuant to the agency’s policy

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

Income ☐
Ceremonial Role ☐ Other ☐
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
West Valley Boys & Girls Club So Youth pgms, activities & services

4. Verification
I have read and understand FPPC Regulations 19464.1 and 19464.2. 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)
8/31/15

Comment: 25 tickets to concert

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

2. **Function or Event Information**
   - Does the agency have a ticket policy? Yes [x] No [ ]
   - Event Description
   - Ticket(s)/Pass(es) provided by agency? Yes [ ] No [x]
   - Was ticket distribution made at the behest of agency official? No [x] Yes [ ]
   - Face Value of Each Ticket/Pass $35
   - Date(s) 7/15/15 8/25/15
   - If no: Hollywood Bowl
   - Name of Source
   - If yes: Official's Name (Last, First)

3. **Recipients**
   - A. Name of Agency, Department or Unit
   - Number of Ticket(s)/Pass(es)
   - Describe the public purpose made pursuant to the agency's policy
   - B. Name of Individual
   - Number of Ticket(s)/Pass(es)
   - Ceremonial Role [ ] Other [x]
   - Ceremonial Role [ ] Other [ ]
   - Ceremonial Role [ ] Other [ ]
   - Ceremonial Role [ ] Other [ ]
   - C. Name of Outside Organization
   - Number of Ticket(s)/Pass(es)
   - Describe the public purpose made pursuant to the agency's policy
   - Sam Fernando Kiwanis Club
   - 33 Volunteer organization

4. **Verification**
   - I have read and understood FPPC Regulations 19561.1 and 19642. 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
   - Date (Month, Day, Year)
   - 8/1/15
   - Print Name Title
   - 8/1/15
   - Comment: Yolanda Valadez 8/1/15 8/1/15
## 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

- **Does the agency have a ticket policy?** Yes [x] No [x]
- **Event Description:**
  - Provide Title/Explanation
- **Ticket(s)/Pass(es) provided by agency?** Yes [x] No [x]
- **Was ticket distribution made at the behest of agency official?** Yes [x] No [x]

- **Face Value of Each Ticket/Pass:** $35
- **Date(s):** 1/7/15, 8/4/15
- **Location:** Hollywood Bowl
- **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

<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></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### B. Name of Individual

<table>
<thead>
<tr>
<th>Name of Individual</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></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### C. Name of Outside Organization

<table>
<thead>
<tr>
<th>Name of Outside Organization</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>Being Alive LA</td>
<td>0</td>
<td>HIV/AIDS health wellness program</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 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:**

**Comment:** 25 9/11/15 30 7/12/15 35 8/11/15
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]
   Face Value of Each Ticket/Pass $35
   Event Description: Provide Title/Explanation
   Date(s): 8/15, 8/20
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [x]
   Was ticket distribution made at the behest of agency official? Yes [ ] No [x]
   If no: Hollywood Bowl
   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

   B. Name of Individual
      Number of Ticket(s)/Pass(es)
      Ceremonial Role [ ] Other [ ]
      Identify one of the following:
      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

   JFS of LA 25 Senior Center community

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18947. I have verified that the distribution set forth above is in accordance with the requirements.
   Yolanda Valadez [Signature] Ticket Administrator
   Print Name: Print Name
   (Month, Day, Year): 8/31/15
   Comment: 8/31/15-10am for 8/31/15 & 9/11/15

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: Provide Title/Explanation
Ticket(s)/Pass(es) provided by agency? Yes [ ] No [x]
Was ticket distribution made at the behest of agency official? No [x] Yes [ ]
Face Value of Each Ticket/Pass: $35
Date(s): 7/19/15 8/4/15
If no: 
If yes: Hollywood Bowl

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

B. Name of Individual
Number of Ticket(s)/Pass(es)
Identify one of the following:
Ceremonial Role [ ] Other [ ]
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 18041.1 and 18042. I have verified that the distribution set forth above, is in accordance with the requirements.

Yolanda Valadez Ticket Administrator 8/13/15
Signature of Agency Head or Designee Print Name Title
Comment: 25 to ea. Concert
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
Divison, 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 $35
   Date (s) 6/28/15
   Ticket(s)/Pass(es) provided by agency?  Yes  No
   If no:  Hollywood Bowl
   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.

<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></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Ceremonial Role  Other  Income</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<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>
<tbody>
<tr>
<td>Topanga Youth Services</td>
<td>52</td>
<td>Youth creative enrichment &amp; comm. svc.</td>
</tr>
</tbody>
</table>

4. Verification
   I have read and understood FPPC Regulations 19344.1 and 1944. 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)
   6/28/15

   Comment: 10 tickets 6/25/15 & 6/28/15
## Agency Report of:
### Ceremonial Role Events and Ticket/Pass Distributions

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

2. **Function or Event Information**
   - **Does the agency have a ticket policy?** Yes [x] No [ ]
   - **Event Description**
     - Provide Title/Explanation
   - **Ticket(s)/Pass(es) provided by agency?** Yes [ ] No [x]
   - **Was ticket distribution made at the behest of agency official?** No [x] Yes [ ]
   - **Face Value of Each Ticket/Pass** $35
   - **Date(s)** 8/4/15 9/1/15
   - **Name of Source** Hollywood Bowl

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**

   **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**

   **Housing Works**
   - **50 Accessible housing & service**

4. **Verification**
   - **I have read and understand FPPC Regulations 19224.1 and 19242. 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**
     - Yoladae@bos.lacounty.gov
   - **Print Name**
     - Yolanda Valadez
   - **Title**
     - Ticket Administrator
   - **Date** (Month, Day, Year)
     - 8/13/15
   - **Comment**
     - 25 tickets ea. concert
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 $ 35
   Event Description
   Provide Title/Explanation
   Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐
   Date(s) 7/9/15 9/8/15
   Was ticket distribution made at the behest of agency official? Yes ☑ No ☐
   If yes: Hollywood Bowl
   Name of Source
   If no: Hollywood Bowl
   Name of Source

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

   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

   St. Joseph's Center
   Social services for low-income families

4. Verification
   I have read and understand FPPC Regulations 18224.1 and 18242. 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: 25 tickets to concert.
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
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? [ ] Yes [ ] No

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

Face Value of Each Ticket/Pass

Date(s) 8/20/15 9/1/15

Name of Source: Hollywood Bowl

3. Recipients

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

B. Name of Individual | Number of Ticket(s)/Pass(es) | Ceremonial Role

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

DPCC 50 Social svcs for low-income families

4. Verification
I have read and understand FPPC Regulations 19244.1 and 19247. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee
Yolanda Valadez
Title
Ticket Administrator

Print Name

Comment: 25 tickets ea. conct.
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
   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 $  25
   Event Description
   Ticket(s)/Pass(es) provided by agency?  Yes  ☑  No  ☐
   Date(s)  7/9/15  8/13/15
   If yes:
   Hollywood Bowl
   If no:
   Name of Source
   Was ticket distribution made at the behest of agency official?  Yes  ☑  No
   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

   B. Name of Individual
      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
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy

   My Friends Place  SO Social Svcs for homeless youth

4. Verification
   I have read and understand FPPC Regulations 18044.1 and 18047. 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
   Title
   (Month, Day, Year)

   Comment:  25 tickets to ea. concert

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

2. **Function or Event Information**
   - **Does the agency have a ticket policy?** Yes [X] No [ ]
   - **Event Description**
     - Provide Title/Explanation
   - **Face Value of Each Ticket/Pass** $35
   - **Date(s)** 7/9/15 8/13/15
   - **Was ticket distribution made at the behest of agency official?** No [ ] Yes [X]
   - **Name of Source** Hollywood Bowl
   - **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**
   - **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**
     - San Fernando Valley
     - **Mental Health Svcs for All Ages**

4. **Verification**
   - I have read and understand FPPC Regulations 18244, 18248. I have verified that the distribution set forth above is in accordance with the requirements.
   - **Signature of Agency Head or Designee**
   - **Print Name** Yolanda Valadez
   - **Title** Ticket Administrator
   - **Date (Month, Day, Year)** 8/13/15
   - **Comment:** 25 to ea. conc.”

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 888/ASK-FPPC (888/275-7772)
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
   Face Value of Each Ticket/Pass: $35

2. Function or Event Information
   Does the agency have a ticket policy? Yes [x] No [ ]
   Event Description: [Provide Title/Explanation]
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [x]
   Date(s): 6/12/15 8/4/15
   If no: Hollywood Bowl
   Name of Source:
   Was ticket distribution made at the behest of agency official? Yes [x] No [ ]
   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
   [ ]
   [ ]

   B. Name of Individual (Last, First) | Number of Ticket(s)/Pass(es) | Identify one of the following:
   [ ]
   Ceremonial Role [ ] Other [ ] Income [ ]
   [ ]
   Ceremonial Role [ ] Other [ ] Income [ ]
   [ ]
   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
   [ ]
   PATH 50 Supportive Svcs for Homeless
   [ ]

4. Verification
   I have read and understand FPPC Regulations 18944.1 and 18984. 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
   8/13/15
   Print Name
   Title
   (Month, Day, Year)

Comment: 25 tickets to en. cancmt.
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 ☐
   Event Description: Provide Title/Explanation
   Face Value of Each Ticket/Pass: $35
   Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐
   Date(s): 7/9/15 9/1/15
   Was ticket distribution made at the behest of agency official? Yes ☑ No ☐
   If yes: Hollywood Bowl
   Name of Source:
   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
      | | |

   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
      | | |

The Teen Project 50 Transition-age youth support

4. Verification
   I have read and understand FPPC Regulations 19944.1 and 1842. 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: 8/31/15

   Comment: 25 tickets to ea. concept.
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 $35
   Event Description: Provide Title/Explanation
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   Date(s): 7-19-15 & 6-25-15
   If no: Hollywood Bowl
   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

   B. Name of Individual (Ex: Fox)
      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

   Village Family Services
   Bilingual Family Wellness Agency

4. Verification
   I have read and understand FPPC Regulations 18632 and 18642. 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):
   Number:

   Comment: 25 tickets to ca. Council
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 2)
   Date of Original Filing:

2. Function or Event Information
   Does the agency have a ticket policy? Yes [X] No [ ]
   Face Value of Each Ticket/Pass: $35
   Event Description:
   Provide Title/Explanation
   Date(s): 6/28/15
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [X]
   Hollywood Bowl
   Name of Source
   Was ticket distribution made at the behest of agency official? Yes [X] No [ ]
   Official’s Name (Last, First)
   9/11/15
   9/18/15

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.

   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency’s policy

   B. Name of Individual (Last, Firs)
      Number of Ticket(s)/Pass(es)
      If checking “Ceremonial Role” or “Other” describe below:
      Ceremonial Role [ ] Other [ ] Income [ ]
      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
      Congregation Shaarei Tefila
      Senior Center Community

4. Verification
   I have read and understand FPPC Regulations 19844,1 and 19845. 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: 8/13/115
   (Month, Day, Year)

   Comment: 5/21/115 25/8/125115 10/9/115

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 [ ]
   Event Description
   [Provide Title/Explanation]
   Face Value of Each Ticket/Pass $35
   Date(s): 6/28/15 7/16/15
   Ticket(s)/Pass(es) provided by agency? Yes [x] No [ ]
   If no: Hollywood Bowl
   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

   B. Name of Individual
      [Last, First]
      Number of Ticket(s)/Pass(es)
      Ceremonial Role [ ] Other [ ]
      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

   Valley Self Help Center 31 12-step & self-help meeting location

4. Verification
   I have read and understand FPPC Regulations 18944, 1 and 19824. I have verified that the distribution set forth above is in accordance with the requirements.
   Yolanda Valadez [Signature] Ticket Administrator [Print Name]
   Title [ ]
   Date: 8/3/15
   Comment: [ ]

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)