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 $ 325.00
   Event Description: The Marriage of Figaro
   Date(s) 4/4/15
   Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐
   If no: LA Opera
   Name of Source
   Was ticket distribution made at the behest of agency official? No ☐ 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:
   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 18044.1 and 18049. 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 4/30/15
   (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

2. Function or Event Information
   - Does the agency have a ticket policy? Yes [x] No [ ]
   - Event Description: Cinderella
   - Face Value of Each Ticket/Pass: $125.00
   - Date(s): 4/14/15, 4/27/15
   - Ticket(s)/Passe(s) provided by agency: Yes [ ] No [x]
   - Name of Source: Ahmanson Theatre
   - Was ticket distribution made at the behest of agency official? No [ ] Yes [x]

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.
   - Number of Ticket(s)/Pass(es)
   - Describe the public purpose made pursuant to the agency’s policy

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Ceremonial Role</th>
<th>Other</th>
<th>Income</th>
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<tr>
<td>Board of Supervisors</td>
<td>4</td>
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<td>Per Ticket Policy 5.3(k)</td>
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</tbody>
</table>

4. Verification
   - I have read and understand FPPC Regulations 18044.4 and 18042. 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
   - Date: 4/13/15
   - Title: (Month, Day, Year)
   - 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 ☐ No ☐
   Face Value of Each Ticket/Pass $ 29.00
   Event Description: Devin Alley Dance
   Date(s) 4/10/15
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   If no: Dancing Chandila Pavilion
   Name of Source: Chandila Pavil
   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
   
   Board of Supervisors 2 Per Ticket Policy 5.3(k)

   B. Name of Individual (Date of Birth)
   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
   

4. Verification
   I have read and understand FPPC Regulations 19441.1 and 19442. 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: Ticket Administrator
   Title: 4/10/15
   (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 valadez@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☐ No ☑
   Event Description: Annual Airing of Dancers
   Face Value of Each Ticket/Pass: $154.00
   Date(s): 4/19/15
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   If no: Dorothy Chandler Pavilion
   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:
      Board of Supervisors
      Number of Ticket(s)/Pass(es): 2
      Describe the public purpose made pursuant to the agency's policy: 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 18943. 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: 4/13/15
   (Month, Day, Year)
   Comment:

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