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, Third District
   - Designated Agency Contact (Name, Title)
   - Liz Rangel, Ticket Administrator
   - Area Code/Phone Number: 213-974-3333
   - E-mail: lrangel@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 [X] No [ ]
   - Event Description: Musical
   - Face Value of Each Ticket/Pass $: 165.00
   - Date(s): 08 12 12
   - Ticket(s)/Pass(es) provided by agency: Yes [X] No [ ]
   - If no: Performing Arts Center of Los Angeles County
     - Name of Source
   - Was ticket distribution made at the behest of agency official? No [X] 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
   - Name of Individual (Last, First)
   - Number of Ticket(s)/Pass(es)
   - Identify one of the following:
     - Ceremonial Role [ ] Other [X] Income [ ]
     - If checking "Ceremonial Role" or "Other" describe below:
       - Per ticket policy 5.3 (k)
       - Ceremonial Role [ ] Other [ ] Income [ ]
       - If checking "Ceremonial Role" or "Other" describe below:

   **C.** Name of Outside Organization
   - 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
   - Print Name
   - Title
   - Date (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, Third District
   Designated Agency Contact (Name, Title)
   Liz Rangel, Ticket Administrator
   Area Code/Phone Number: 213-974-3333
   E-mail: trangel@bos.lacounty.gov
   Date Stamp: California Form 802
   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 [x] No
   Event Description: Musical
   Provide Title/Explanation
   Ticket(s)/Pass(es) provided by agency? Yes [x] No
   Face Value of Each Ticket/Pass $165.00
   Date(s) 08 26 12
   If no: Performing Arts Center of Los Angeles County
   Name of Source
   Official's Name (Last, First)
   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 | 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:
   Cynthia Scott 2 Per ticket policy 5.3 (k)
   Ceremonial Role [x] 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 19241 and 19242. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head or Designee: Liz Rangel
   Print Name: Ticket Administrator
   Title: 12/28/2012
   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, Third District
   - Designated Agency Contact (Name, Title): Liz Rangel, Ticket Administrator
   - Area Code/Phone Number: 213-974-3333
   - E-mail: Irangel@bos.lacounty.gov

2. **Function or Event Information**
   - **Does the agency have a ticket policy?** Yes [x] No [ ]
   - **Event Description**: Opera
   - **Face Value of Each Ticket/Pass**: $240.00
   - **Date(s)**: 09 29 12
   - **Ticket(s)/Pass(es) provided by agency?** Yes [ ] No [x]
   - **If no**: Performing Arts Center of Los Angeles County
   - **Was ticket distribution made at the behest of agency official?** No [x] Yes [ ]

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 [x]
     - Per ticket policy 5.3 (k)
     - Income [ ]
   - **C. Name of Outside Organization**
     - Number of Ticket(s)/Pass(es)
     - Describe the public purpose made pursuant to the agency's policy

4. **Verification**
   - Signature of Agency Head or Designee: [Signature]
   - **Liz Rangel**
   - **Ticket Administrator**
   - **Date of Filing**: 12/28/2012
   - **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, Third District
   - Designated Agency Contact (Name, Title)
   - Liz Rangel, Ticket Administrator
   - Area Code/Phone Number: 213-974-3333
   - E-mail: lrangel@bos.lacounty.gov

2. **Function or Event Information**
   - Does the agency have a ticket policy? [Yes] [No]  
   - Face Value of Each Ticket/Pass: $240.00  
   - Event Description: Opera
   - Date(s): 10 10 12
   - Ticket(s)/Pass(es) provided by agency?: [Yes] [No]
   - If no: Performing Arts Center of Los Angeles County
   - 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:
     - Ceremonial Role
     - Other [X]
     - Income
     - Per ticket policy 5.3 (k)
     - 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

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: [Signature]
   - Liz Rangel
   - Ticket Administrator
   - Print Name
   - Title
   - Date: 12/28/2012
   - (Month, Day, Year)

   Comment:
## Agency Report of:
### Ceremonial Role Events and Ticket/Pass Distributions

#### A Public Document

<table>
<thead>
<tr>
<th>Field</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Agency Name</strong></td>
<td>County of Los Angeles</td>
</tr>
<tr>
<td><strong>Division, Department, or Region (If Applicable)</strong></td>
<td>Board of Supervisors, Third District</td>
</tr>
<tr>
<td><strong>Designated Agency Contact</strong> (Name, Title)</td>
<td>Liz Rangel, Ticket Administrator</td>
</tr>
<tr>
<td><strong>Area Code/Phone Number</strong></td>
<td>213-974-3333</td>
</tr>
<tr>
<td><strong>E-mail</strong></td>
<td><a href="mailto:lrangel@bos.lacounty.gov">lrangel@bos.lacounty.gov</a></td>
</tr>
<tr>
<td><strong>Face Value of Each Ticket/Pass $</strong></td>
<td>50.00</td>
</tr>
<tr>
<td><strong>Date(s)</strong></td>
<td>10 18 12</td>
</tr>
<tr>
<td><strong>Ticket(s)/Pass(es) provided by agency?</strong></td>
<td>Yes ☒ No ☐</td>
</tr>
<tr>
<td><strong>Was ticket distribution made at the behest of agency official?</strong></td>
<td>No ☐ Yes ☒</td>
</tr>
</tbody>
</table>

#### Function or Event Information

- **Does the agency have a ticket policy?** Yes ☒ No ☐
- **Event Description** | play |
- **Provide Title/Explanation** |
- **If no:** Performing Arts Center of Los Angeles County
- **Name of Source** |
- **Official’s Name (Last, First)** |

#### 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: |
  | Zev Yaroslavsky | 2 | 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 |

#### 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**

**Print Name**

**Title**

**Date (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, Third District
   Designated Agency Contact (Name, Title)
   Liz Rangel, Ticket Administrator
   Area Code/Phone Number: 213-974-3333
   E-mail: lirangel@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes [X] No [ ]
   Face Value of Each Ticket/Pass: $125.00
   Event Description: ballet
   Date(s): 10 [ ] 20 [X] 12 [ ]
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [X]
   If no: Performing Arts Center of Los Angeles County
   Name of Source: Official's Name (Last, First)
   Was ticket distribution made at the behest of agency official? No [X] Yes [ ]

3. Recipients
   A. Name of Agency, Department or Unit
   B. Name of Individual (Last, First)
      Alisa Katz
      Number of Ticket(s)/Pass(es): 2
      Identify one of the following:
      Ceremonial Role [ ] Other [X]
      Income [ ]
      If checking "Ceremonial Role" or "Other" describe below:
      Per ticket policy 5.3 (k)
      Ceremonial Role [ ] Other [ ] Income [ ]
      If checking "Ceremonial Role" or "Other" describe below:
   C. Name of Outside Organization (Include address and description)
      Describe the public purpose made pursuant to the agency's policy

4. Verification
   I have read and understand FPPC Regulations 18241.1 and 18242. I have verified that the distribution set forth above is in accordance with the requirements.
   Signature of Agency Head or Designee: Liz Rangel
   Print Name: Liz Rangel
   Title: Ticket Administrator
   Date (Month, Day, Year): 12/28/2012
   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, Third District  
Designated Agency Contact (Name, Title)  
Liz Rangel, Ticket Administrator  
Area Code/Phone Number  
213-974-3333  
E-mail  
irangel@bos.lacounty.gov

2. Function or Event Information  
Does the agency have a ticket policy?  
Yes [x]  
No  
Event Description  
[Blank]  
Face Value of Each Ticket/Pass $  
50.00  
Date(s)  
10  
26  
12  
Ticket(s)/Pass(es) provided by agency?  
Yes  
No [x]  
If no:  
Performing Arts Center of Los Angeles County  
Name of Source  
If yes:  
Official’s Name (Last, First)

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

B. Name of Individual  
Tim Pershing  
Number of Ticket(s)/Pass(es):  
2  
Identify one of the following:  
Ceremonial Role  
Other [x]  
Income  
Per ticket policy 5.3 (k)  
Ceremonial Role  
Other  
Income  
If checking “Ceremonial Role” or “Other” describe below:

C. Name of Outside Organization (Include address and description):  
[Blank]  
Number of Ticket(s)/Pass(es):  
[Blank]  
Describe the public purpose made pursuant to the agency’s policy:  
[Blank]

4. Verification  
I have read and understand FPPC Regulations 18644.1 and 18645. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head of Division:  
Liz Rangel  
Print Name:  
Ticket Administrator  
Title:  
12/28/2012  
(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, Third District
   Designated Agency Contact (Name, Title)
   Liz Rangel, Ticket Administrator
   Area Code/Phone Number 213-974-3333
   E-mail irangel@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Face Value of Each Ticket/Pass $165.00
   Event Description play
   Data(s) 11, 16, 12
   Ticket(s)/Passe(s) provided by agency? Yes ☐ No ☑
   If no: Performing Arts Center of Los Angeles County
   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

   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:
      Per ticket policy 5.3 (k)
      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 18244.1 and 18244. I have verified that the distribution set forth above, is in accordance with the requirements.
   Liz Rangel
   Signature of Agency Head / Designee
   Print Name
   Title
   (Month, Day, Year)
   Comment:

FPPC Form 802 (4/12)
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# Agency Report of:
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## 1. Agency Name
- County of Los Angeles
  - Division, Department, or Region (If Applicable)
  - Board of Supervisors, Third District
  - Designated Agency Contact (Name, Title)
    - Liz Rangel, Ticket Administrator
    - Area Code/Phone Number: 213-974-3333
    - E-mail: Irangel@bos.lacounty.gov

## 2. Function or Event Information
- Does the agency have a ticket policy? Yes [X] No [ ]
- Face Value of Each Ticket/Pass: $100.00
- Event Description: Concert @ Walt Disney Concert Hall
- Date(s): 08 26 12
- Ticket(s)/Pass(es) provided by agency? Yes [X] No [ ]
- If no: Performing Arts Center of Los Angeles County
- 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>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>
</tr>
</tbody>
</table>

### B. Name of Individual
- Name: Regina Marquez
- Number of Ticket(s)/Pass(es): 2
- Ceremonial Role [ ] Other [X]
- Income [ ]
- Per ticket policy 5.3 (k)
- 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 PPPC 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: Liz Rangel
Print Name: Liz Rangel
Title: Ticket Administrator
Date: 12/28/2012

Comment:
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**: Concert @ Walt Disney Concert Hall
   **Face Value of Each Ticket/Pass $**: $99.00
   **Date(s)**: 11 23 12
   **Ticket(s)/Pass(es) provided by agency?** Yes [ ] No [X]
   **Performing Arts Center of Los Angeles County**
   **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 [X]
   - Per ticket policy 5.3 (k)
   - Income [ ]
   **C. Name of Outside Organization**
   **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 18924.2. I have verified that the distribution set forth above, is in accordance with the requirements.
   **Date** 12/28/2012
   **Signature**
   **Print Name**
   **Title**

**Comment**
### Agency Name
County of Los Angeles

### Division, Department, or Region (If Applicable)
Board of Supervisors, Third District

### Designated Agency Contact (Name, Title)
Liz Rangel, Ticket Administrator

### Area Code/Phone Number, E-mail
213-974-3333 irangel@bos.lacounty.gov

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### Function or Event Information

<table>
<thead>
<tr>
<th>Does the agency have a ticket policy? Yes[ ] No[ ]</th>
<th>Face Value of Each Ticket/Pass $</th>
<th>Date(s)</th>
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</thead>
<tbody>
<tr>
<td>Concert @ Walt Disney Concert Hall</td>
<td>168.00</td>
<td>11 24 12</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Ticket(s)/Pass(es) provided by agency? Yes[ ] No[ ]</th>
<th>If no: Performing Arts Center of Los Angeles County</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Name of Source</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Was ticket distribution made at the behest of agency official? Yes[ ] No[ ]</th>
<th>If yes: Official's Name (Last, First)</th>
</tr>
</thead>
</table>

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### 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>
</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>Ann Miller</td>
<td>2</td>
<td>Ceremonial Role [ ] Other [x]</td>
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</tbody>
</table>

Per ticket policy 5.3 (k)

<table>
<thead>
<tr>
<th>Ceremonial Role [ ] Other [ ] Income [ ]</th>
</tr>
</thead>
<tbody>
<tr>
<td></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></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

---

### Verification

I have read and understand FPPC Regulations 18044.1 and 18042. I have verified that the distribution set forth above is in accordance with the requirements.

Liz Rangel
Ticket Administrator
12/28/2012

Comment:

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