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

			A Public Documer			
Agency Name		Date Stamp	California 802			
			101111			
Division, Department, or Reg	i <b>on</b> (If Applicab		For Official Use Only			
Los Angeles County Arts Cor	nmission					
Designated Agency Contact (	Name, Title)					
Miriam Gonzalez						
	E-mail	Amendment (Mus	t provide explanation in Part 3.)			
213-202-5858	mgonzalez@arts.lacounty.gov			Date of Original Filing	g: (Month, Day, Year)	
Function or Event Infor	nation					
Does the agency have a ticker	policy?	Yes No	Face Value	e of Each Ticket/Pass \$	\$75	
The Appro						
Event Description		olanation	Date(s)			
Ticket(s)/Pass(es) provided by	agency?	Voc∏ No	Isl If no: Cent	r Theatre Group		
		<u></u> -		Name of S	Source	
	t the behest	No 🔲 Yes	If yes:			
				Official's Name	(Last, First)	
Use Section A to identify the agency	's department or		ction B to identify an indiv	idual. • Use Section C to ide	entify an outside organization.	
A. Name of Agency, Department or Unit		Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy			
Arts Commisison		2	Policy 5.3b - Job duties of the official.			
B. Name of Individual		Number of Ticket(s)/ Pass(es)	2001-10-040-001-001-001-001-001-001-001-0		Income	
	d 12 % 1 (22 %				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			
	**************************************					
/erification						
have read and understand FPPC Regula	tions 18 <u>944.1 and</u>	l 18942. I have ve	ified that the distribution se	forth above, is in accordance w	ith the requirements.	
111686			Exe	cutive Assistant	10/19/15	
Signature of Agency Head or Designee		Print Nam		Title	(Month, Day, Year)	
The second section of the second seco						
	County of Los Angeles Division, Department, or Regi Los Angeles County Arts Cor Designated Agency Contact ( Miriam Gonzalez Area Code/Phone Number 213-202-5858 Function or Event Information Does the agency have a ticket Event Description Ticket(s)/Pass(es) provided by Was ticket distribution made a of agency official? Recipients Use Section A to identify the agency A. Name of Agency, Department Arts Commission  B. Name of Individual (Lest First)  Verification have read and understand FPPC Regular have read and understand FPPC Regular  Verification have read and understand FPPC Regular	County of Los Angeles  Division, Department, or Region (If Applicable)  Los Angeles County Arts Commission  Designated Agency Contact (Name, Title)  Miriam Gonzalez  Area Code/Phone Number E-mail 213-202-5858 E-mail 213-202-58	County of Los Angeles Division, Department, or Region (If Applicable)  Los Angeles County Arts Commission  Designated Agency Contact (Name, Title)  Miriam Gonzalez  Area Code/Phone Number	County of Los Angeles Division, Department, or Region (If Applicable)  Los Angeles County Arts Commission Designated Agency Contact (Name, Title)  Miriam Gonzalez  Area Code/Phone Number	County of Los Angeles Division, Department, or Region (If Applicable)  Los Angeles County Arts Commission Designated Agency Contact (Name, Table)  Miriam Gonzalez  Area Code/Phone Number   E-mail	

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

Ceremonial Role Events and Ticket/Pass Distributions					A Public Documer			
Agency Name						Date Stamp	California 802	
County of Los Angeles							10111	
Division,	Division, Department, or Region (If Applicable)						For Official Use Only	
Los Angeles County Arts Commission								
Designated Agency Contact (Name, Title)								
Miriam G	onzalez							
Area Cod	le/Phone Number	E-mail				Amendment (Musi	provide explanation in Part 3.)	
213-202-5	5858	mgonzalez	ngonzalez@arts.lacounty.gov			Date of Original Filing	(Month, Day, Year)	
. Functio	n or Event Infor	mation			- Annual -		¢04	
Does the	agency have a ticke	et policy?	Yes⊠ No	Fac	e Value o	f Each Ticket/Pass \$	\$84	
Event De	These Paper Rullets				e(s) 9	,16 ,15		
Ticket(s)/	·				Geffen	Playhouse	Source	
Was ticke	t distribution made	at the behest	No□ Yes	☐ If ye	28.	750,100,10		
of agend	y official?		110 🔁 100	- ",	.0.	Official's Name	(Last, First)	
Recipie	nts							
Use Section	on A to identify the agend	y's department o		ction B to identify	an individu	al. • Use Section C to ide	ntify an outside organization.	
A. Nar	A. Name of Agency, Department or Unit Number Ticket(s Pass(es			Describe the public purpose made pursuant to the agency's policy				
Arts Commisison			2	Policy 5.3b - Job duties of the official.				
B. Name of Individual		a	Number of Ticket(s)/ Pass(es)	(CVC-2000)	ionial Role E	Identify one of the follow  Other  Identify one of the follow	Income L	
				981-200825-00	onial Role	Other Al 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				
		GP - 10 - 10 - 10 - 10 - 10 - 10 - 10 - 1						
     Verificat		NO.						
I have read an	nd understand FPPC Regul		<i>d 18942. I have ve</i> n Gonzalez	rified that the distr		<del>th above, is in accordance w</del> tive Assistant		
Signatur	Silling				Lexecu		10/19/15	
Signatur	o or Agency mean or besignee		Print Nam	C		Title	(Month, Day, Year)	
•		1 19 Family	The same of the same of	W W W W			- W	

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

Ceremonial Role Events and Ti	icket/Pas	s Distributions		A Public Documen		
1. Agency Name			Date Stamp	California 802		
County of Los Angeles			ж	TOIM		
Division, Department, or Region (If Application)	ble)			For Official Use Only		
Los Angeles County Arts Commission						
Designated Agency Contact (Name, Title)			1			
Miriam Gonzalez						
Area Code/Phone Number E-mail	Amendment (Must )	provide explanation in Part 3.)				
213-202-5858 mgonzalez	Date of Original Filing: (Month, Day, Year)					
2. Function or Event Information						
Does the agency have a ticket policy?	Yes⊠ No	Face Value o	of Each Ticket/Pass \$	25		
Event Description The Object Lesson  Provide Title/Ex	kplanation	Date(s) 9	05 15	9 9 15		
Ticket(s)/Pass(es) provided by agency?	Yes□ No	If no: Center	Theater Group  Name of So	ource		
Was ticket distribution made at the behest of agency official?	No☐ Yes	s If yes:	Official's Name (	Last, First)		
3. Recipients						
Use Section A to identify the agency's department of	or unit. • Use Se	ection B to identify an Individu	ıal. • Use Section C to iden	tify an outside organization.		
A. Name of Agency, Department or Unit	Number of Ticket(s)/ Pass(es)	Describe the pub	lic purpose made pursuant	to the agency's policy		
Arts Commisison	4	Policy 5.3b - Job duties of the official.				
B. Name of Individual	Number of Ticket(s)/ Pass(es)		Identify one of the follow	ing:		
		Ceremonial Role	Other Other Other describe below:	Income 🗌		
		Ceremonial Role	Other al 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				
V-dfi-ati-						
Verification I have read and understand FPPC Regulations 18944.1 and	nd 18942. I have ve	erified that the distribution set to	rth above, is in accordance with	h the requirements		
	n Gonzalez		tive Assistant	10/19/15		
Signature of Agency Head of Designee	Print Narr		Tille	(Month, Day, Year)		
		2.20		(in-Uniti, Day, Teat)		
Comment:	1		age and the standard Manager Access			