Tickets Provided by
Agency Report

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable): Board of Supervisor
   Street Address: 500 W. Temple St., Room 869 Los Angeles, CA 90012
   Area Code/Phone Number: 213-974-5555
   E-mail: fifthdistrict.lacbos.org
   Agency Contact (name and title): Linda Balderrama

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 09/04/09, 10/05/09
   Description of Event: Los Angeles County Fair
   Face Value of Ticket: $17.00
   Agency Event: Yes
   No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles County Fair
   Number of Tickets Received: 40
   Ticket(s) Provided to Agency: ☒ Gratuitously
   ☐ Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
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<tr>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: Ulises Guiterrez, Outreach Coordinator
   Name of Individual or Organization: Santa Anita YMCA
   Number of Tickets: 10
   Description of Organization: Organization for youths
   Address of Organization: 501 S. Mountain Ave.
   Number and Street: Monrovia
   City: CA
   State: 91016
   Zip Code:
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   Encouraging or recognizing significant academic, athletic, or public achievements

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: Linda Balderrama
   Print Name: Ticket Administrator
   Title: 9-24-09
   (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   Board of Supervisor
   Street Address
   500 W. Temple St., Room 869 Los Angeles, CA 90012
   Area Code/Phone Number
   213-974-5555
   E-mail
   fifthdistrict.lacusos.org
   Agency Contact (name and title)
   Linda Balderrama

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 09/04/09 10/05/09
   Description of Event: Los Angeles County Fair
   Face Value of Ticket: $17.00
   Agency Event: No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency:
   Los Angeles County Fair
   Number of Tickets Received: 40
   Ticket(s) Provided to Agency: Gratuitously

3. Agency Official(s) Receiving Ticket(s) (use a continuuation sheet for additional names)
<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
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<tbody>
<tr>
<td></td>
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<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: Gino Sund, Chair
   Name of Individual or Organization: Altadena Town Council
   Number of Tickets: 40
   Description of Organization: Elected Advisory Board
   Address of Organization: 730 E. Altadena Dr
   Altadena CA 91001
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   Promoting intergovernmental relations

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 19944.1.
   Signature of Agency Head or Designee: Linda Balderrama
   Print Name: Ticket Administrator: 9-24-09
   Title: (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
FPPC Form 802 (Feb/09)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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

2. **Event For Which Tickets Were Distributed**
   - **Date(s) of Event:**
     - 09/04/09
     - 09/10/09
   - **Description of Event:** Los Angeles County Fair
   - **Face Value of Ticket:** $17.00

3. **Agency Official(s) Receiving Ticket(s)**
   - **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:**

4. **Individual or Organization Receiving Ticket(s)**
   - **Name of Behesting Agency Official:** Steve Pierce, Chair
   - **Name of Individual or Organization:** Crescenta Town Council
   - **Number of Tickets:** 40
   - **Description of Organization:** Elected Advisory Board
   - **Address of Organization:** PO Box 8676 La Crescent CA 91214
   - **Purpose for Distribution:** Promoting intergovernmental relations

5. **Verification**
   - **Signature of Agency Head or Designee:** Linda Balderrama
   - **Ticket Administrator:**
   - **Date:** 9-24-09
   - **Comment:** (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by
Agency Report

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   Board of Supervisor
   Street Address
   500 W. Temple St., Room 869 Los Angeles, CA 90012
   Area Code/Phone Number 213-974-5555
   E-mail fifthdistrict.lacbos.org
   Agency Contact (name and title)
   Linda Balderama
   Date Stamp
   □ Amendment (Must explain in Part 5.)
   Date of Original Filing: (month, day, year)

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 09/04/09 10/05/09
   Description of Event: Los Angeles County Fair
   Face Value of Ticket: $ 17.00
   Agency Event □ Yes □ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles County Fair
   Number of Tickets Received: 40
   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

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: Robert Monk, Executive Director
   Name of Individual or Organization: Boys & Girls Club of the Foothills
   Number of Tickets: 10
   Description of Organization: Organization for youths
   Address of Organization: PO Box 2386 Monrovia CA 91017
   Number and Street City State Zip Code
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   Encouraging or recognizing significant academic, athletic, or public achievements

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 Linda Balderama
   Print Name Ticket Administrator
   Title 9-24-09 (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Tickets Provided by Agency Report

A Public Document

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   Board of Supervisor
   Street Address
   500 W. Temple St., Room 869 Los Angeles, CA 90012
   Area Code/Phone Number
   213-974-5555
   E-mail
   fifthdistrict.lacbos.org
   Agency Contact (name and title)
   Linda Balderrama

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 
   Description of Event: Los Angeles County Fair
   Face Value of Ticket: $17.00
   Agency Event: No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles County Fair
   Number of Tickets Received: 40
   Ticket(s) Provided to Agency: Gratuitously

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
   

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: Jim Ventress, Executive Director
   Name of Individual or Organization: Santa Clarita Valley Boys & Girls club
   Number of Tickets: 40
   Description of Organization: Organization for youths
   Address of Organization: 24909 Newhall Ave. Santa Clarita CA 91322
   Number and Street City State Zip Code
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   Encouraging or recognizing significant academic, athletic, or public achievements

5. Verification
   I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 19944.1.
   Linda Balderrama
   Ticket Administrator
   9-24-09
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by Agency Report

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   Board of Supervisor
   Street Address
   500 W. Temple St., Room 869 Los Angeles, CA 90012
   Area Code/Phone Number
   213-974-5555
   E-mail
   filthdistrict.lacbos.org
   Agency Contact (name and title)
   Linda Balderrama

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 09/04/09
   Description of Event: Los Angeles County Fair
   10/05/09
   Face Value of Ticket: $ 17.00
   Agency Event
   □ Yes  ☒ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles County Fair
   Number of Tickets Received: 40
   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

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

   Name of Behesting Agency Official: Deputy Sheriff Art Valenzuela
   Name of Individual or Organization: Youth Activities League - Pamela Park
   Number of Tickets: 10
   Description of Organization: Organization for youths
   Address of Organization: 2236 Goodall Ave.
   Duarte  CA  91010
   Number and Street  City  State Zip Code
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   Encouraging or recognizing significant academic, athletic, or public achievements

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
   Linda Balderrama
   Print Name
   Ticket Administrator
   9-24-09
   Title
   (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by
Agency Report

A Public Document

TICKETS PROVIDED BY
AGENCY REPORT

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   Board of Supervisor
   Street Address
   500 W. Temple St., Room 869 Los Angeles, CA 90012
   Area Code/Phone Number: 213-974-5555
   E-mail: fifthdistrict.lacbos.org
   Agency Contact (name and title)
   Linda Balderrama

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 09 / 04 / 09
   Description of Event: Los Angeles County Fair
   10 / 05 / 09
   Face Value of Ticket: $17.00
   Agency Event: □ Yes    ☑ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency:
   Los Angeles County Fair
   Number of Tickets Received: 40
   Ticket(s) Provided to Agency: ☑ Gratuitously    □ Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

<table>
<thead>
<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
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<tbody>
<tr>
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</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
   Name of Behesting Agency Official: Irving Montenegro, Rec. Services Supervisor
   Name of Individual or Organization: Pamela Park
   Number of Tickets: 10
   Description of Organization: Los Angeles County park
   Address of Organization: 2236 Goodall Ave., Duarte, CA 91010
   Number and Street: 2236 Goodall Ave.
   City: Duarte
   State: CA
   Zip Code: 91010
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   Supporting & appreciation for community and nonprofit programs or services that benefit County residents

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: [Signature]
   Print Name: Linda Balderrama
   Title: Ticket Administrator
   Date: 9-24-09

   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
1. **Agency Name**
   County of Los Angeles

   **Division, Department, or Region (if applicable)**
   Board of Supervisor

   **Street Address**
   500 W. Temple St., Room 869 Los Angeles, CA 90012

   **Area Code/Phone Number**
   213-974-5555

   **E-mail**
   fifthdistrict.lacbos.org

   **Agency Contact (name and title)**
   Linda Balderama

2. **Event For Which Tickets Were Distributed**
   **Date(s) of Event:**
   - 09 / 04 / 09
   - 10 / 05 / 09

   **Description of Event:** Los Angeles County Fair

   **Face Value of Ticket:** $17.00

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

   **Name of Outside Source of Ticket(s) Provided to Agency:** Los Angeles County Fair

   **Number of Tickets Received:** 40

   **Ticket(s) Provided to Agency:**
   - Gratuitously
   - Pursuant to Contract

3. **Agency Official(s) Receiving Ticket(s)** (use a continuation sheet for additional names)

<table>
<thead>
<tr>
<th>Name of Official</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Debra Rodarte</td>
<td>2</td>
<td>Retaining highly qualified County employees</td>
</tr>
</tbody>
</table>

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:**
   Linda Balderama

   **Print Name:**
   Ticket Administrator

   **Title:**
   9-24-09

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

FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
1. **Agency Name**
   - County of Los Angeles
   - Division, Department, or Region (if applicable)
   - Board of Supervisor

2. **Event For Which Tickets Were Distributed**
   - **Date(s) of Event:** 09/04/09
   - **Description of Event:** Los Angeles County Fair
   - **Date(s) of Event:** 05/05/09
   - **Description of Event:** Los Angeles County Fair

3. **Agency Official(s) Receiving Ticket(s)**
   - **Name of Official:** Susie Osuna
   - **Number of Tickets:** 2
   - **State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution:** Retaining highly qualified County employees

4. **Individual or Organization Receiving Ticket(s)**
   - **Name of Behesting Agency Official:**
   - **Name of Individual or Organization:**
   - **Number of Tickets:**
   - **Description of Organization:**
   - **Address of Organization:**
   - **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:** Linda Balderrama
   - **Print Name:** Ticket Administrator
   - **Title:** 9-24-09
   - **Date:** (month, day, year)

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

---

**FPPC Form 802 (Feb/09)**
**FPPC Toll-Free Helpline:** 866/ASK-FPPC (866/275-3772)
2. Event For Which Tickets Were Distributed

<table>
<thead>
<tr>
<th>Date(s) of Event</th>
<th>Description of Event</th>
<th>Face Value of Ticket</th>
</tr>
</thead>
<tbody>
<tr>
<td>09/04/09</td>
<td>Los Angeles County Fair</td>
<td>$17.00</td>
</tr>
<tr>
<td>10/05/09</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **Agency Event**: Yes  No (Identify source of tickets below.)
- **Name of Outside Source of Ticket(s) Provided to Agency**: Los Angeles County Fair
- **Number of Tickets Received**: 40
- **Ticket(s) Provided to Agency**: Gratuitously

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

<table>
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<tr>
<th>Name of Official (Last, First)</th>
<th>Number of Tickets</th>
<th>State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution</th>
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</thead>
<tbody>
<tr>
<td>Sandra Cruz</td>
<td>2</td>
<td>Retaining highly qualified County employees</td>
</tr>
</tbody>
</table>

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**: 

- **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.

_L. Balderrama_  
Signature of Agency Head or Designee

_Linda Balderrama_  
Ticket Administrator

9-24-09  
(month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
2. Event For Which Tickets Were Distributed

Date(s) of Event: 09 / 04 / 09 10 / 05 / 09
Description of Event: Los Angeles County Fair
Face Value of Ticket: $17.00
Agency Event Yes No
(I Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles County Fair
Number of Tickets Received: 40
Ticket(s) Provided to Agency: Gratuitously

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

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<tbody>
<tr>
<td>Cathey Hunter</td>
<td>2</td>
<td>Retaining highly qualified County employees</td>
</tr>
</tbody>
</table>

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: __________________________

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.

Linda Balderrama

Signature of Agency Head or Designee

Print Name

Ticket Administrator

Title

9-24-09

(month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
 Tickets Provided by Agency Report

1. Agency Name

County of Los Angeles
Division, Department, or Region (if applicable)
Board of Supervisor
Street Address
500 W. Temple St., Room 869 Los Angeles, CA 90012
Area Code/Phone Number
213-974-5555
E-mail
fifteenthdistrict.lacbos.org
Agency Contact (name and title)
Linda Balderrama

2. Event For Which Tickets Were Distributed

Date(s) of Event: 09/04/09 10/05/09
Description of Event: Los Angeles County Fair
Face Value of Ticket: $17.00
Agency Event □ Yes □ No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles County Fair
Number of Tickets Received: 40
Ticket(s) Provided to Agency: ☑ Gratuitously □ Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

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<tbody>
<tr>
<td>Lori Glasgow</td>
<td>2</td>
<td>Retaining highly qualified County employees</td>
</tr>
</tbody>
</table>

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]
Linda Balderrama
Ticket Administrator
9-24-09 (month, day, year)

Comment: (Use this space or an attachment for any additional information including amendment explanation.)
Tickets Provided by
Agency Report

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   Board of Supervisor
   Street Address
   500 W. Temple St., Room 869 Los Angeles, CA 90012
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   E-mail
   fifthdistrict.lacbos.org
   Agency Contact (name and title)
   Linda Balderrama

   Date Stamp

   California
   Form 802
   For Official Use Only

   □ Amendment (Must explain in Part 5)
   Date of Original Filing: ___/___/___

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 09/04/09 10/05/09
   Description of Event: Los Angeles County Fair
   Face Value of Ticket: $17.00
   Agency Event □ Yes  X No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: Los Angeles County Fair
   Number of Tickets Received: 40
   Ticket(s) Provided to Agency: □ Gratuitously □ Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

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</thead>
<tbody>
<tr>
<td>Mary Villegas</td>
<td>2</td>
<td>Retaining highly qualified County employees</td>
</tr>
</tbody>
</table>

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: ____________________________
   Date: 9-24-09 (month, day, year)

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

   FPPC Form 802 (Feb/09)
   FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)