Tickets Provided by
Agency Report

1. Agency Name
   Los Angeles County
   Board of Supervisors - First District

   Street Address
   500 West Temple Street, Suite 856, Los Angeles, CA 90012

   Area Code/Phone Number: (213) 974-4111
   E-mail: Molina@lacity.org
   Agency Contact (name and title): Joanie Paul - Senior Administrative Assistant / Ticket Administrator

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 07/30/09
   Description of Event: LA Philharmonic at Hollywood Bowl
   Face Value of Ticket: $26.00
   Agency Event: ☑ Yes ☐ No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: LA Philharmonic

   Number of Tickets Received: 28
   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.)
   Supervisor Gloria Molina
   Name of Behesting Agency Official: 
   Name of Individual or Organization: Neighborhood Legal Services
   Number of Tickets: 28
   Description of Organization: Community organization.
   Address of Organization: 1102 Chevy Chase Drive
   Glendale
   CA
   91205
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   5.31 Support community programs 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 19944.1.
   Signature of Agency Head or Designee: Joanie Paul
   Ticket Administrator
   Print Name: Title
   Date of Original Filing: 01/21/10 (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
Los Angeles County

Division, Department, or Region (if applicable)
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Area Code/Phone Number
(213) 974-4111

Email
Molina@lacbos.org

Agency Contact (name and title)
Joanie Paul - Senior Administrative Assistant / Ticket Administrator

2. Event For Which Tickets Were Distributed
Date(s) of Event: 07/30/09
Description of Event: LA Philharmonic at Hollywood Bowl
Face Value of Ticket: $26.00

Agency Event: ☑ Yes ☐ No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: LA Philharmonic

Number of Tickets Received: 12
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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4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Supervisor Gloria Molina

Name of Individual or Organization: Monterey Park Sister Cities Association

Number of Tickets: 12
Description of Organization:
Community organization.

Address of Organization:
801 Divina Vista Street
Monterey Park
CA 91754

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
5.3i) Support community programs 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 19444.1.

Joanie Paul
Ticket Administrator
01/21/10

Signature of Agency Head or Designee
Print Name
Title

Comment: (Use this space for an attachment for any additional information including amendment explanation.)
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500 West Temple Street, Suite 856, Los Angeles, CA 90012
Area Code/Phone Number  (213) 974-4111
E-mail Molina@lacobos.org
Agency Contact (name and title) Joanie Paul - Senior Administrative Assistant / Ticket Administrator

2. Event For Which Tickets Were Distributed

Date(s) of Event: 08/18/09
Description of Event: LA Philharmonic at Hollywood Bowl
Face Value of Ticket: $26.00
Agency Event Yes No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: LA Philharmonic
Number of Tickets Received: 12
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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4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Supervisor Gloria Molina
Name of Individual or Organization: Monterey Park Sister Cities Association
Number of Tickets: 12
Description of Organization: Community organization.
Address of Organization: 801 Divina Vista Street Monterey Park CA 91754

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
5.3i) Support community programs 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.

Joanie Paul Ticket Administrator 01/21/10

Signature of Agency Head or Designee Print Name Title (month, day, year)

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

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Area Code/Phone Number
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E-mail
Molina@lacbos.org
Agency Contact (name and title)
Joanie Paul - Senior Administrative Assistant / Ticket Administrator

2. Event For Which Tickets Were Distributed
Date(s) of Event: 06/06/09
Description of Event: LA Philharmonic at Hollywood Bowl
Agency Event
☐ Yes  ☒ No (Identify source of tickets below.)
Name of Outside Source of Ticket(s) Provided to Agency: LA Philharmonic
Number of Tickets Received: 12
Ticket(s) Provided to Agency: ☒ Gratuitously  ☐ Pursuant to Contract

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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4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)
Name of Behesting Agency Official: Supervisor Gloria Molina
Name of Individual or Organization: Monterey Park Sister Cities Association
Number of Tickets: 12
Description of Organization: Community organization.
Address of Organization:
801 Divina Vista Street
Monterey Park
CA
91754
Number and Street
City
State
Zip Code
Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
5.3i) Support community programs 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 19944.1.

Joanie Paul
Ticket Administrator
01/21/10
(month, day, year)
Signature of Agency Head or Designee
Print Name
Title
**Tickets Provided by Agency Report**

**A Public Document**

1. **Agency Name**
   Los Angeles County
   Board of Supervisors - First District

2. **Event For Which Tickets Were Distributed**
   - **Date(s) of Event:** 08/27/09
   - **Description of Event:** LA Philharmonic at Hollywood Bowl
   - **Face Value of Ticket:** $26.00
   - **Agency Event:** No
   - **Name of Outside Source of Ticket(s) Provided to Agency:** LA Philharmonic
   - **Number of Tickets Received:** 15
   - **Ticket(s) Provided to Agency:** Gratisously

3. **Agency Official(s) Receiving Ticket(s)**
   - **Name of Official:**
   - **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:** Supervisor Gloria Molina
   - **Name of Individual or Organization:** Monterey Care Center
   - **Number of Tickets:** 15
   - **Description of Organization:** Facility located in the First District
   - **Address of Organization:**
     - **1267 San Gabriel Boulevard, Rosemead CA 91770**
   - **Purpose for Distribution:** (Describe the public purpose for the distribution to the organization.)

5. **Verification**
   - **Signature of Agency Head or Designee:**
   - **Print Name:** Joanie Paul
   - **Title:** Ticket Administrator
   - **Date:** 01/21/10
   - **Comment:** (Use this space for an attachment for any additional information including amendment explanation.)
Tickets Provided by Agency Report

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1. Agency Name
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   Division, Department, or Region (if applicable)
   Board of Supervisors - First District

   Street Address
   500 West Temple Street, Suite 856, Los Angeles, CA 90012

   Area Code/Phone Number E-mail
   (213) 974-4111 Molina@lacbos.org

   Agency Contact (name and title)
   Joanie Paul - Senior Administrative Assistant / Ticket Administrator

2. Event For Which Tickets Were Distributed

   Date(s) of Event: 08/11/09
   Description of Event: LA Philharmonic at Hollywood Bowl
   Face Value of Ticket: $30.00

   Agency Event
   □ Yes  ■ No (Identify source of tickets below.)

   Name of Outside Source of Ticket(s) Provided to Agency:
   LA Philharmonic

   Number of Tickets Received: 50
   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.)

   Supervisor Gloria Molina

   Name of Behesting Agency Official:
   Monterey Park Senior Center

   Name of Individual or Organization: Monterey Park Senior Center

   Number of Tickets: 50

   Description of Organization:
   Community organization for seniors.

   Address of Organization:
   400 West Emerson Avenue

   Monterey Park
   CA 91754

   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
   5.3(i) Support community programs 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 16944.1.

   Joanie Paul
   Ticket Administrator

   Signature of Agency Head or Designee: Print Name: Title
   (month, day, year)

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

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