Tickets Provided by Agency Report

A Public Document

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   Board of Supervisors
   Street Address
   500 W. Temple St. #669 Los Angeles 90012
   Area Code/Phone Number
   213-974-5555
   Email
   fitthdistrict@lacbos.org
   Agency Contact (name and title)
   Linda Balderrama Ticket Administrator

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 7/07/10
   Description of Event: Dodger game
   Face Value of Ticket: $60.00
   Agency Event: Yes No (Identify source of tickets below.)
   Name of Outside Source of Ticket(s) Provided to Agency: LA Dodgers
   Number of Tickets Received: 2
   Ticket(s) Provided to Agency: Gravitationally

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>Osuna, Susie</td>
<td>2</td>
<td>retain quality 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.

   Linda Balderrama
   Signature of Agency Head or Designee
   Print Name
   Ticket Administrator
   Title
   6-16-10 (month, day, year)

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

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FPPC Form 802 (Feb/09)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
1. Agency Name
   County of Los Angeles
   Board of Supervisors
   Street Address
   500 W. Temple St. #869 Los Angeles 90012
   Area Code/Phone Number 213-974-5555
   E-mail fifthdistrict@lacbos.org
   Agency Contact (name and title) Linda Balderrama Ticket Administrator

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 7/11/10
   Description of Event: Dodger game
   Face Value of Ticket: $60.00

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>Castellanos, Lupe</td>
<td>2</td>
<td>retain quality 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.
   Linda Balderrama
   Ticket Administrator
   6-16-10
   (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**

1. **Agency Name**  
   County of Los Angeles

2. **Event For Which Tickets Were Distributed**  
   **Date(s) of Event:** 7/08/10  
   **Description of Event:** Dodger game  
   **Face Value of Ticket:** $60.00

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>Garcia, Lizette</td>
<td>2</td>
<td>retain quality 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:**

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:** Linda Balderrama  
   **Title:** Ticket Administrator  
   **Date of Filing:** 6-16-10

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

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FPPC Toll-Free Hotline: 866/ASK-FPPC (866/275-3772)