**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. Room 869, Los Angeles 90012

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

   **E-mail**
   - fifthdistrict@lacsos.org

   **Agency Contact (name and title)**
   - Linda Balderrama  Ticket Administrator

   **Date Stamp**
   - California Form 802
   - For Official Use Only

   **Amendment (Must explain in Part 5)**
   - Date of Original Filing: \( 12/15/10 \)

2. **Event For Which Tickets Were Distributed**

   **Date(s) of Event:** \( 10/17/10 \)
   - **Description of Event:** LA Philharmonic
   - **Face Value of Ticket:** $100.00
   - **Agency Event:** Yes
   - **Name of Outside Source of Ticket(s) Provided to Agency:** LA Philharmonic
   - **Number of Tickets Received:** 2
   - **Ticket(s) Provided to Agency:** Gratuitously

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

<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>
</tr>
</tbody>
</table>

4. **Individual or Organization Receiving Ticket(s)**

   **Name of Behesting Agency Official:** Sharon Townsend Roth

   **Name of Individual or Organization:** Glendale Foundation for the Retarded

   **Number of Tickets:** 2

   **Description of Organization:** Social Services organization for disabled children

   **Address of Organization:**
   - 6512 San Fernando Rd
   - Glendale
   - CA
   - 91201

   **Purpose for Distribution:** Scholarship fundraiser auction

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:**

   **Date:** 10-12-10

   **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**

**Agency Name:**
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Board of Supervisors

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

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

**E-mail:**
fifthdistrict@lacobos.org

**Agency Contact (name and title):**
Linda Balderrama Ticket Administrator

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**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>12/14/10</td>
<td>LA Philharmonic</td>
<td>$100.00</td>
</tr>
</tbody>
</table>

**Agency Event:**

- [X] Yes
- [ ] No (Identify source of tickets below.)

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

**Number of Tickets Received:**

- 2

**Ticket(s) Provided to Agency:**

- [X] Gratuitously
- [ ] Pursuant to Contract

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**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>Argonz-Gomez, Theresa</td>
<td>2</td>
<td>Retaining quality employees</td>
</tr>
</tbody>
</table>

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**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.)

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**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:**

- **(month, day, year):**
  - 12-14-10

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

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   Board of Supervisors
   500 W. Temple St. Room 869, Los Angeles 90012
   Area Code/Phone Number: 213-974-5555
   E-mail: fifthdistrict@iacbos.org
   Agency Contact (name and title): Linda Balderrama
   Ticket Administrator

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 11 / 18 / 10
   Description of Event: LA Auto Show
   Face Value of Ticket: $250.00
   Agency Event: No

   Name of Outside Source of Ticket(s) Provided to Agency: Homeless Health Care Los Angeles
   Number of Tickets Received: 5
   Ticket(s) Provided to Agency: Gratisually

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
   Antonovich, Mike  |   5               |   Promoting intergovernmental relations

4. Individual or Organization Receiving Ticket(s)
   Name of Beesting 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: 12-10-10
   (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)

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   E-mail fifthdistrict@lacobos.org
   Agency Contact (name and title) Linda Balderrama  Ticket Administrator

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 12/8/10
   Description of Event: LA Philharmonic
   Face Value of Ticket: $100.00
   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: 2
   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: Anna Jung
   Name of Individual or Organization: Asian Youth Center
   Number of Tickets: 2
   Description of Organization: Youth organization
   Address of Organization: 100 W. Clary Ave. San Gabriel CA 91776
   Number and Street City State Zip Code
   Purpose for Distribution: (Describe the public purpose for the distribution to the organization.) Fundraiser auction

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
   (Signature of Agency Head or Designee) Print Name Title 12-10-10
   (month, day, year)
   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
   Signature
   FPPC Form 802 (Feb/09)
   FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
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   - 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: 12/18/10
   - Description of Event: LA Philharmonic
   - Face Value of Ticket: $100.00
   - 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: 2
   - 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: Sharon Price
   - Name of Individual or Organization: Llano Community Association
   - Number of Tickets: 2
   - Description of Organization: Community organization
   - Address of Organization: PO Box 7 Llano CA 93544
   - Number and Street
   - City
   - State
   - Zip Code
   - Purpose for Distribution: (Describe the public purpose for the distribution to the organization.) Scholarship fundraiser auction

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: 12-10-10
     - (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  E-mail
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   Agency Contact (name and title)
   Linda Balderrama  Ticket Administrator

2. Event For Which Tickets Were Distributed
   Date(s) of Event: 12 / 4 / 10
   Description of Event: LA Philharmonic

   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: 2
   Ticket(s) Provided to Agency: Gratuitously

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</th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Describe the Public Purpose for the Distribution</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: Pat Allen
   Name of Individual or Organization: Boys & Girls Club of Santa Clarita Valley
   Number of Tickets: 2

   Description of Organization: Youth organization
   Address of Organization: 24238 Main St
   Newhall  CA  93544

   Purpose for Distribution: Scholarship fundraiser auction

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: 12-10-10
   (month, day, year)

   Comment: (Use this space or an attachment for any additional information including amendment explanation.)
   No Signature