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

1. Agency Name
Los Angeles County Board of Supervisors
Division, Department, or Region (If Applicable)
First District
Designated Agency Contact (Name, Title)
Avianna Uribe, Ticket Administrator
Area Code/Phone Number E-mail
(213) 974-4111 Molina@lacobos.org

2. Function or Event Information
Does the agency have a ticket policy? Yes ☐ No ☒
Event Description Concert at Hollywood Bowl
Face Value of Each Ticket/Pass $21.00
Date(s) 09 11 12
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
If no: LA Philharmonic
Name of Source
If yes: Supervisor Gloria Molina
Official's Name (Last, First)

3. Recipients
* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit Number of Ticket(s)/Pass(es) Describe the public purpose made pursuant to the agency's policy

B. Name of Individual (Last, First) Number of Ticket(s)/Pass(es) Identify one of the following:
Ceremonial Role ☐ Other ☐ Income ☐
If checking "Ceremonial Role" or "Other" describe below:

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
USC Memory and Aging Center
1520 San Pablo St., #3000, LA, CA 90033 22 Per Ticket Policy 5.3 (i)
Support for caregivers.

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
Avianna Uribe Ticket Administrator
Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Los Angeles County Board of Supervisors
   Division, Department, or Region (If Applicable)
   First District
   Designated Agency Contact (Name, Title)
   Avianna Uribe, Ticket Administrator
   Area Code/Phone Number, E-mail
   (213) 974-4111 Molina@lacbos.org
   Date Stamp
   Amendement (Must provide explanation in Part 3)
   Date of Original Filing

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☐ No ☑
   Face Value of Each Ticket/Pass $ 21.00
   Event Description Concert at Hollywood Bowl
   Date(s) 09 11 12
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   If no: LA Philharmonic
   Name of Source
   If yes: Supervisor Gloria Molina
   Official's Name (Last, First)

3. Recipients
   * Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.
   A. Name of Agency, Department or Unit | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency's policy
      | | |
   B. Name of Individual (Last, First) | Number of Ticket(s)/Pass(es) | Identify one of the following:
      | Ceremonial Role ☐ Other ☐ Income ☐
      | if checking "Ceremonial Role" or "Other" describe below:
      | Ceremonial Role ☐ Other ☐ Income ☐
      | if checking "Ceremonial Role" or "Other" describe below:
   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
      | Huntington Park Key Club
      | Post Office Box 39685, Downey, CA 90239 30 Per Ticket Policy 5.3 (i)
      | High school students who do acts of service for the community.

4. Verification
   I have read and understand FPPC Regulations 19544.1 and 19542. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head or Designee
   Avianna Uribe
   Print Name
   Ticket Administrator
   Title
   (Month, Day, Year) 10/31/12
   Comment:
   FPPC Form 802 (4/12)
   FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Los Angeles County Board of Supervisors
   Division, Department, or Region (if Applicable)
   First District
   Designated Agency Contact (Name, Title)
   Avianna Uribe, Ticket Administrator
   Area Code/Phone Number E-mail
   (213) 974-4111 Molina@lacbos.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Event Description Concert at Hollywood Bowl
   Face Value of Each Ticket/Pass $ 21.00
   Date(s) 09 11 12
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   LA Philharmonic
   Name of Source
   If yes: Supervisor Gloria Molina
   Official's Name (Last, First)

3. Recipients
   * Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy

   B. Name of Individual (Last, First)
      Number of Ticket(s)/Pass(es)
      Identify one of the following:
      Ceremonial Role ☐ Other ☐ Income ☐
      If checking "Ceremonial Role" or "Other" describe below:

   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

   Friends of Salazar Park Seniors
   453 N. Daisy Ave., Pasadena, CA 90023
   30 Per Ticket Policy 5.3 (i)
   Volunteer support services.

4. Verification
   I have read and understand FPPC Regulations 19544 and 19542. I have verified that the distribution set forth above, is in accordance with the requirements.

   Signature of Agency Head or Designee
   Avianna Uribe
   Print Name
   Ticket Administrator
   Title
   (Month, Day, Year)

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

1. Agency Name
   Los Angeles County Board of Supervisors
   First District
   Designated Agency Contact (Name, Title)
   Avianna Uribe, Ticket Administrator
   Area Code/Phone Number  E-mail
   (213) 974-4111 Molina@lacbos.org

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California Form 802
For Official Use Only
Date Stamp

2. Function or Event Information
   Does the agency have a ticket policy?  Yes  No
   Event Description  Concert at Hollywood Bowl
   Ticket(s)/Pass(es) provided by agency?  Yes  No
   Was ticket distribution made at the behest of agency official?  No  Yes

   Face Value of Each Ticket/Pass $21.00
   Date(s) 11/12
   Name of Source  LA Philharmonic
   Name of Supervisor  Gloria Molina

3. Recipients
   * Use Section A to identify the agency's department or unit.  * Use Section B to identify an individual.  * Use Section C to identify an outside organization.
   A. Name of Agency, Department or Unit  Number of Ticket(s)/Pass(es)
   B. Name of Individual  Number of Ticket(s)/Pass(es)
   C. Name of Outside Organization (include address and description)  Number of Ticket(s)/Pass(es)

4. Verification
   I have read and understand FPPC Regulations 18541 and 18542. I have verified that the distribution set forth above, is in accordance with the requirements.

   Signature of Agency Head or Designee  Print Name  Title
   Avianna Uribe  Ticket Administrator

Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Hotline: 888/ASK-FPPC (888/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Los Angeles County Board of Supervisors
   Division, Department, or Region (If Applicable)
   First District
   Designated Agency Contact (Name, Title)
   Avianna Uribe, Ticket Administrator
   Area Code/Phone Number E-mail
   (213) 974-4111 Molina@lacbos.org

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Event Description Concert at Hollywood Bowl
   Provide Title/Explanation
   Face Value of Each Ticket/Pass $21.00
   Date(s) 09 11 12
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   Name of Source
   If no: LA Philharmonic
   If yes: Supervisor Gloria Molina
   Official's Name (Last, First)

3. Recipients
   • Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.
   A. Name of Agency, Department or Unit Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy
      
      
   B. Name of Individual (Last, First) Number of Ticket(s)/Pass(es)
      Ceremonial Role ☐ Other ☐ Income ☐
      If checking "Ceremonial Role" or "Other" describe below:
      
      
      
   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
      
      
   Friends of El Monte Library
   3224 N. Tyler Ave., El Monte, CA 91731 30 Per Ticket Policy 5.3 (i)
   Volunteer support services.

4. Verification
   I have read and understood FPPC Regulations 18944.1 and 18945. I have verified that the distribution set forth above is in accordance with the requirements.
   Signature of Agency Head or Designee
   Avianna Uribe Ticket Administrator
   Print Name Title
   (Month, Day, Year) 10/31/12

Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Los Angeles County Board of Supervisors

Division, Department, or Region (If Applicable)

First District

Designated Agency Contact (Name, Title)
Avianna Uribe, Ticket Administrator

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

Date Stamp

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2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No ☐

Face Value of Each Ticket/Pass $21.00

Event Description Concert at Hollywood Bowl

Provide Title/Explanations

Date(s) 09 11 12

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑

If no: LA Philharmonic

Name of Source

Was ticket distribution made at the behest of agency official? No ☐ Yes ☑

If yes: Supervisor Gloria Molina

Official's Name (Last, First)

3. Recipients
* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit

Number of Ticket(s)/Pass(es)

Describe the public purpose made pursuant to the agency's policy

B. Name of Individual (Last, First)

Number of Ticket(s)/Pass(es)

Identify one of the following:

Ceremonial Role ☐ Other ☐ Income ☐

If checking "Ceremonial Role" or "Other" describe below:

Ceremonial Role ☐ Other ☐ Income ☐

If checking "Ceremonial Role" or "Other" describe below:

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

East Los Angeles Community Corporation
530 S. Boyle Ave., Los Angeles, CA 90033

30 Per Ticket Policy 5.3 (i)

Provides affordable housing and health services to low-income families.

4. Verification
I have read and understood FPPC Regulations 18944.1 and 18944. I have verified that the distribution set forth above is in accordance with the requirements.

Avianna Uribe
Ticket Administrator

Print Name Title

(Month, Day, Year)

Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Los Angeles County Board of Supervisors

2. Function or Event Information
Does the agency have a ticket policy? Yes [x] No [ ]

Event Description: Concert at Hollywood Bowl

Face Value of Each Ticket/Pass $21.00

Date(s): 09 11 12

Ticket(s)/Pass(es) provided by agency? Yes [ ] No [x]

Was ticket distribution made at the behest of agency official? No [ ] Yes [x]

Name of Source: LA Philharmonic

Official's Name (Last, First): Supervisor Gloria Molina

3. Recipients
* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit

B. Name of Individual

C. Name of Outside Organization (Include address and description)

East LA Community Service Center
133 N. Sunol Dr., Los Angeles, CA 90063

Number of Ticket(s)/Pass(es): 55

Per Ticket Policy 5.3 (i)

Provides family services to low-income communities.

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above is in accordance with the requirements.

Signature of Agency Head or Designee: Avianna Uribe
Print Name: Ticket Administrator
Title: (Month, Day, Year: 10/31/10)

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

1. Agency Name
Los Angeles County Board of Supervisors
Division, Department, or Region (If Applicable)
First District

Designated Agency Contact (Name, Title)
Avianna Uribe, Ticket Administrator

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

Date Stamp

A Public Document

2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No □
Face Value of Each Ticket/Pass $ 21.00
Event Description Concert at Hollywood Bowl
Provide Title/Explanation

Date(s) 09 11 12

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
If no: LA Philharmonic
Name of Source

Was ticket distribution made at the behest of agency official? No ☐ Yes ☑
If yes: Supervisor Gloria Molina
Official's Name (Last, First)

3. Recipients
* Use Section A to identify the agency's department or unit.  * Use Section B to identify an individual.  * Use Section C to identify an outside organization.

A. Name of Agency, Department or Unit Number of Ticket(s)/Pass(es) Describe the public purpose made pursuant to the agency's policy

B. Name of Individual (Last, First) Number of Ticket(s)/Pass(es) Identify one of the following:
Ceremonial Role ☐ Other ☐ Income ☐
If checking "Ceremonial Role" or "Other" describe below:

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

Children's Institute 2121 W. Temple St., Los Angeles, CA 90026 30 Per Ticket Policy 5.3 (i)
Provides family services.

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee Print Name Title
Avianna Uribe Ticket Administrator

(Date, Month, Day, Year)

Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 888/ASK-FPPC (855/275-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Los Angeles County Board of Supervisors
Division, Department, or Region (If Applicable)
First District

Designated Agency Contact (Name, Title)
Avianna Uribe, Ticket Administrator
Area Code/Phone Number E-mail
(213) 974-4111 Molina@lacbos.org

Date Stamp
California Form 802
For Official Use Only

 Amendment (Must provide explanation in Part 3)
Date of Original Filing: (Month, Day, Year)

2. Function or Event Information
Does the agency have a ticket policy? Yes [ ] No [ ]
Face Value of Each Ticket/Pass $21.00
Event Description Concert at Hollywood Bowl
Provide Title/Explanation
Date(s) 09 11 12
Ticket(s)/Pass(es) provided by agency? Yes [ ] No [ ] LA Philharmonic
If no: Name of Source
If yes: Supervisor Gloria Molina
Official’s Name (Last, First)

3. Recipients
* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(e)s</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(e)s</th>
</tr>
</thead>
</table>

Identify one of the following:

- Ceremonial Role [ ]
- Other [ ]
- Income [ ]

If checking "Ceremonial Role" or "Other" describe below:

<table>
<thead>
<tr>
<th>Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(e)s</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>C.R.C.T. Carmel Native American Tribe 240 East First St., Pomona, CA 91766</td>
<td>12</td>
<td>Per Ticket Policy 5.3 (i) Provides family services for the Native American community.</td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 19942. I have verified that the distribution set forth above is in accordance with the requirements.

Avianna Uribe [Signature of Agency Head or Designee]
Ticket Administrator [Print Name]
(Title)
(Month, Day, Year)

Comment:

FPPC Form 802 (4/12)
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Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

A Public Document

1. Agency Name
Los Angeles County Board of Supervisors
Division, Department, or Region (If Applicable)
First District
Designated Agency Contact (Name, Title)
Avianna Uribe, Ticket Administrator
Area Code/Phone Number: (213) 974-4111
E-mail: Molina@lacbos.org

2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No ☐
Event Description: Concert at Hollywood Bowl
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
Was ticket distribution made at the behest of agency official? No ☐ Yes ☑
Date(s): 09/06/12
Face Value of Each Ticket/Pass: $21.00
Name of Source: LA Philharmonic
If yes: Supervisor Gloria Molina
Officer's Name (Last, First)

3. Recipients
* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual. * Use Section C to identify an outside organization.

   A. Name of Agency, Department or Unit

<table>
<thead>
<tr>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
</table>

   B. Name of Individual

<table>
<thead>
<tr>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
<td></td>
</tr>
</tbody>
</table>

   | Ceremonial Role ☐ Other ☐ Income ☐ |

   C. Name of Outside Organization (Include address and description)

<table>
<thead>
<tr>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>St. Stephens Baptist Church 1720 Walnut Ave., La Puente, CA 91744 ☑ 30 Per Ticket Policy 5.3 (i)</td>
<td></td>
</tr>
</tbody>
</table>
   Provides community services to youth and seniors in the community.

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee: Avianna Uribe
Print Name: Ticket Administrator
Title: (Month, Day, Year) 10/21/12

Comment:

FPPC Form 802 (4/12)
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Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. **Agency Name**
   Los Angeles County Board of Supervisors
   Division, Department, or Region (If Applicable)
   First District
   Designated Agency Contact (Name, Title)
   Avianna Uribe, Ticket Administrator
   Area Code/Phone Number E-mail
   (213) 974-4111 Molina@lacbos.org

2. **Function or Event Information**
   Does the agency have a ticket policy? Yes [ ] No [X]
   Event Description
   Concert at Hollywood Bowl
   Face Value of Each Ticket/Pass $21.00
   Date(s) 09/06/12
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [X]
   If no: LA Philharmonic
   Name of Source
   If yes: Supervisor Gloria Molina
   Official's Name (Last, First)

3. **Recipients**
   * Use Section A to identify the agency's department or unit.
   * Use Section B to identify an individual.
   * Use Section C to identify an outside organization.

   **Section A**
   Name of Agency, Department or Unit
   Number of Ticket(s)/Pass(es)
   Describe the public purpose made pursuant to the agency's policy

   **Section B**
   Name of Individual
   (Last, First)
   Number of Ticket(s)/Pass(es)
   Identify one of the following:
   Ceremonial Role [ ]
   Other [ ]
   Income [ ]
   If checking "Ceremonial Role" or "Other" describe below:

   **Section 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
   Soledad Enrichment, Inc.
   4876 S. Gleason St., Los Angeles, CA 90022
   30
   Per Ticket Policy 5.3 (i)
   Provides educational and parenting classes.

4. **Verification**
   I have read and understand FPPC Regulations 18944.1 and 18943. I have verified that the distribution set forth above, is in accordance with the requirements.
   Signature of Agency Head or Designee
   Avianna Uribe
   Ticket Administrator
   Print Name
   Title
   (Month, Day, Year)
   10/31/12
   Comment:

   FPPC Form 802 (4/12)
   FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
**Agency Report of:**

**Ceremonial Role Events and Ticket/Pass Distributions**

1. **Agency Name**
   
   Los Angeles County Board of Supervisors
   
   Division, Department, or Region (If Applicable)
   
   First District

2. **Function or Event Information**

   Does the agency have a ticket policy? [Yes] [No]
   
   Event Description: Concert at Hollywood Bowl
   
   Face Value of Each Ticket/Pass $21.00
   
   Date(s) 09-06-12
   
   Ticket(s)/Pass(es) provided by agency? [Yes] [No]
   
   If no: LA Philharmonic
   
   If yes: Supervisor Gloria Molina

3. **Recipients**

   - Name of Agency, Department or Unit
     - Number of Ticket(s)/Pass(es)
     - Describe the public purpose made pursuant to the agency's policy

   - Name of Individual (Last, First)
     - Number of Ticket(s)/Pass(es)
     - Identify one of the following:
       - Ceremonial Role
       - Other
       - Income

   - 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

   SIPA (Search to Involve Pinipino Americans)
   3200 W. Temple St., Los Angeles, CA 90026
   30
   Per Ticket Policy 5.3 (i)

   Provides health and human services to youth and families.

4. **Verification**

   I have read and understand FPPC Regulations 18941 and 18942. I have verified that the distribution set forth above is in accordance with the requirements.

   Signature of Agency Head or Designee
   Avianna Uribe
   Ticket Administrator
   (Month, Day, Year)

   Comment:

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Division, Department, or Region (if Applicable)
First District
Designated Agency Contact (Name, Title)
Avianna Uribe, Ticket Administrator
Area Code/Phone Number E-mail
(213) 974-4111 Molina@lacbos.org

2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No ☐
Event Description Concert at Hollywood Bowl
Face Value of Each Ticket/Pas $21.00
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
Date(s) 09 06 12
Was ticket distribution made at the behest of agency official? No ☐ Yes ☑
If yes: Supervisor Gloria Molina

3. Recipients
• Use Section A to identify the agency's department or unit. • Use Section B to identify an individual. • Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
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<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
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<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
</tbody>
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<th>Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ramona Hall Community Center 4580 N. Figueroa St., Los Angeles, CA 90065</td>
<td>40</td>
<td>Per Ticket Policy 5.3 (i) Provides low-cost art, dance and music classes to the community.</td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18944.2. I have verified that the distribution set forth above is in accordance with the requirements.

Signature of Agency Head or Designee: Avianna Uribe
Print Name: Ticket Administrator
Title: (Month, Day, Year): 10/31/12

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

1. Agency Name
Los Angeles County Board of Supervisors
Division, Department, or Region (If Applicable)

First District
Designated Agency Contact (Name, Title)
Avianna Uribe, Ticket Administrator

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

Date Stamp California Form 802
A Public Document
For Official Use Only

2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No □
Face Value of Each Ticket/Pass $21.00
Event Description: Concert at Hollywood Bowl
Date(s) 09 06 12
Ticket(s)/Pass(es) provided by agency? Yes ☑ No □
If no: LA Philharmonic
Name of Source
If yes: Supervisor Gloria Molina
Official's Name (Last, First)

3. Recipients
* Use Section A to identify the agency's department or unit. * Use Section B to identify an individual.* Use Section C to identify an outside organization.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☑ Other ☑ Income ☑</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☑ Other ☑ Income ☑</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>C. Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pomona School of the Arts and Enterprise 295 N. Garey Ave., Pomona, CA 91767</td>
<td>39</td>
<td>Per Ticket Policy 5.3 (i) Provides art and entrepreneurial education for youth.</td>
</tr>
</tbody>
</table>

4. Verification
I have read and understood FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee: Avianna Uribe
Print Name: Ticket Administrator
Title: (Month, Day, Year) 10/31/12

Comment: