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 ☐
Event Description Concert at Hollywood Bowl
Face Value of Each Ticket/Pass $27.00
Date(s) 08 08 13
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)/Passes Describe the public purpose made pursuant to the agency's policy

B. Name of Individual
_Last, First_
Number of Ticket(s)/Passes 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)/Passes Describe the public purpose made pursuant to the agency's policy

Alma Family Services
4701 East Cesar Chavez Ave., LA, CA 90022 10 Per Ticket Policy (1)
Provides community based services.

4. Verification
I have read and understand FPPC Regulations 1942.1 and 1942. I have verified that the distribution set forth above is in accordance with the requirements.

Avianna Uribe 10/10/13
Ticket Administrator
Signature of Agency Head or Designee Print Name Title

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:** $27.00
- **Date(s):** 08 08 13
- **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:**

#### B.
- **Name of individual (Last, First):**
- **Number of Ticket(s)/Pass(es):**
- **Identify one of the following:**
  - **Ceremonial Role** ☑ Other ☐ Income ☐
  - **Ceremonial Role** ☑ Other ☐ Income ☐

#### 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:**
  - Bilingual Foundation of the Arts
  - 421 North Avenue 19, Los Angeles, CA 90031
  - 26 Per Ticket Policy (i)

### 4. Verification
- **Signature of Agency Head or Designee:** Avianna Uribe
- **Print Name:**
- **Title:** Ticket Administrator
- **Date (Month, Day, Year):** 10/10/13

**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: (213) 974-4111
   - E-mail: Molina@lacbos.org

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: $27.00
   - Date(s): 08/08/13
   - Ticket(s)/Pass(es) provided by agency? Yes [x] No [ ]
   - If no: LA Philharmonic
   - Name of Source: 
   - Was ticket distribution made at the behest of agency official? Yes [x] No [ ]
   - 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**
   - Name (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
     - Monterey Park Sister Cities Association
     - 801 Divina Vista St, Monterey Park, CA 91754
     - 13 Per Ticket Policy (i)
     - Volunteer support services.

4. **Verification**
   - I have read and understand FPPC Regulations 19344.1 and 19342.
   - I have verified that the distribution set forth above is in accordance with the requirements.

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

   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
   - First District

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

3. **Function or Event Information**
   - Does the agency have a ticket policy? Yes [x] No [ ]
   - Event Description: Concert at Hollywood Bowl
   - Ticket(s)/Pass(es) provided by agency? Yes [ ] No [x]
   - Was ticket distribution made at the behest of agency official? Yes [x] No [ ]
   - Face Value of Each Ticket/Pass: $27.00
   - Date(s): 08/08/13
   - If no: LA Philharmonic
   - Name of Source: Supervisor Gloria Molina

4. **Recipients**
   - 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
   - Number of Ticket(s)/Pass(es)
   - Identify one of the following:
     - Ceremonial Role
     - Other
     - Income
   - C. Name of Outside Organization: North Whittier Neighborhood Watch
   - Address: 1240 Hanford Ave., Whittier, CA 90601
   - Number of Ticket(s)/Pass(es): 20
   - Describe the public purpose made pursuant to the agency's policy: Per Ticket Policy (I)

5. **Verification**
   - I have read and understand FPPC Regulations 19344.1 and 19942. 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: [ ]
   - Date: 10/10/12

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
     - (213) 974-4111
   - E-mail
     - Molina@lacbos.org
   - Date of Original Filing:

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? Yes[ ] No[ ]
   - Face Value of Each Ticket/Pass: $27.00
   - Date(s): 08 13
   - LA Philharmonic
   - 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)
   - 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 [ ]
   - Ceremonial Role [ ] Other [ ]
   - Income [ ]

   **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

   Sacred Heart Church
   - 1215 S. Hamilton Bl, Pomona, CA 91766
   - 30 Per Ticket Policy (i)
   - Volunteer support services for the community

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.

   **Avianna Uribe**
   - Ticket Administrator
   - Print Name
   - Title
   - (Month, Day, Year)

   Comment:

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
   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 $27.00
   Date(s) 08 08 13
   If no: LA Philharmonic
   Name of Sponsor
   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
      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
      South El Monte Senior Center
      1556 Central Ave., S. El Monte, CA 91733 20 Per Ticket Policy (i)
      Provides services to seniors.

4. Verification
   I have read and understand FPPC Regulations 10244 and 10245. 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)
   Signature of Agency Head or Designee

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: (213) 974-4111
   E-mail: Molina@lacbos.org

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 $27.00
   Date(s): 08 08 13
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [x]
   If no: LA Philharmonic
   Name of Source: Supervisor Gloria Molina
   Was ticket distribution made at the behest of agency official? Yes [x] No [ ]
   If yes: 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
      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
      South San Gabriel Homeless Team
      4500 Santa Anita Ave., El Monte, CA 91731
      12 Per Ticket Policy (i)
      Provides services to homeless constituents.

4. Verification
   I have read and understand FPPC Regulations 10944.1 and 10942. 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:

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
Provide Title/Explanation
Face Value of Each Ticket/Pass $27.00
Date(s) 08 08 13
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
Workman Mill Association Post Box 2146, La Puente, CA 91746 30 Per Ticket Policy (i)

Community organization

4. Verification
I have read and understand FPPC Regulations 10844, 1 and 18947. 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

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    Email
(213) 974-4111    Molina@lacobos.org

2. Function or Event Information
Does the agency have a ticket policy? Yes [X] No [ ]
Event Description Concert at Hollywood Bowl
Provide Title/Explanation
Ticket(s)/Pass(es) provided by agency? Yes [X] No [ ]
Was ticket distribution made at the behest of agency official? No [X] Yes [ ]
Face Value of Each Ticket/Pass $27.00
Date(s) 08 22 13
If no: LA Philharmonic
If yes: Supervisor Gloria Molina
Name of Source
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
Asian Youth Center
232 West Clay Ave., San Gabriel, CA 91776 | 17 | Per Ticket Policy (i)
Provides youth 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
Avianna Uribe
Ticket Administrator
Print Name
Title
(Date, Month, Year)

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: (213) 974-4111
   E-mail: Molina@lacbos.org

Date Stamp: California Form 802
   For Official Use Only
   Amendment: (Must provide explanation in Part 3)

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: $27.00
   Date(s): 08/22/13
   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
      Commerce Senior Center
      2555 Commerce Way, Commerce, CA 90040 ☑ 42 Per Ticket Policy (i)

   Provides services to seniors.

4. Verification
   I have read and understand FPPC Regulations 19344.1 and 19342. 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:

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

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   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 [x] No [ ]
   Face Value of Each Ticket/Pass $27.00
   Event Description: Concert at Hollywood Bowl
   Date(s): 08 22 13
   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.

   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 [x]
      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

      Friends of the Huntington Park Library
      6518 Miles Ave., Huntington Park, CA 90255
      26  Per Ticket Policy ( )  
      Volunteer support services.

4. Verification
   I have read and understand FPPC Regulations 19441 and 19442. 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:  

   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 [X] No [ ]
Event Description Concert at Hollywood Bowl
Provide Title/Explanation
Ticket(s)/Pass(es) provided by agency? Yes [ ] No [X]
Was ticket distribution made at the behest of agency official? No [ ] Yes [X]
Face Value of Each Ticket/Pass $27.00
Date(s) 08/22/13
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 (Last, First)</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>
<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>Friends of the Monterey Park Library 318 S. Ramona Ave., Monterey Park, CA 91754</td>
<td>30</td>
<td>Per Ticket Policy (i)</td>
</tr>
<tr>
<td>Volunteer support services.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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 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  
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@lacs.org

2. **Function or Event Information**  
Does the agency have a ticket policy? **Yes**  
Event Description: Concert at Hollywood Bowl  
Provide Title/Explanation  
Ticket(s)/Pass(es) provided by agency? **No**  
Date(s): 08/22/13  
Face Value of Each Ticket/Pass $27.00

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>

| B. Name of Individual (Last, First) | Number of Ticket(s)/Pass(es) | Identify one of the following:  
Ceremonial Role | Other | Income |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<td>Ceremonial Role</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role</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>
</table>
| Garvey Community Center  
9108 Garvey Ave., Rosemead, CA 91770 | 30 | Per Ticket Policy (i) |
| Provides services to 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  
Ticket Administrator

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**:
  - (213) 974-4111
- **E-mail**: Molina@lacbos.org

### 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**: $27.00
- **Date(s)**: 08/22/13
- **Ticket(s)/Pass(es) provided by agency?** Yes [ ] No [x]
- **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.

#### A. Name of Agency, Department or Unit

<table>
<thead>
<tr>
<th>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>

#### B. Name of Individual

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</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 [x] Other No Income</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
</tbody>
</table>

#### C. Name of Outside Organization

- **Heritage Square Museum**
  - **3800 Homer St., Los Angeles, CA 90031**
  - **Number of Ticket(s)/Pass(es)**: 25
  - **Describe the public purpose made pursuant to the agency's policy**: Per Ticket Policy (i)

#### Historic preservation.

### 4. Verification
- I have read and understand FPPC Regulations 19441 and 19442. 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**:
- **Date**: 10/10/13

**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

**2. Function or Event Information**
- Does the agency have a ticket policy? [ ] Yes [ ] No
- Event Description: Concert at Hollywood Bowl
  Provide Time/Explanation
- Ticket(s)/Pass(es) provided by agency? [ ] Yes [X] No
- Was ticket distribution made at the behest of agency official? [X] Yes [ ] No
- Face Value of Each Ticket/Pass $27.00
- Date(s): 08 22 13
- 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.

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

<table>
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<tr>
<th>B. Name of Individual (Last, First)</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>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</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>Highland Park Adult Senior Center 6152 N. Figueroa St., Los Angeles, CA 90042</td>
<td>10</td>
<td>Per Ticket Policy (i)</td>
</tr>
</tbody>
</table>

**4. Verification**

I have read and understand FPPC Regulations 19944, I and 19942. I have verified that the distribution set forth above is in accordance with the requirements.

Signature of Agency Head or Designee: Avianna Uribe
Title: Ticket Administrator
Print Name: Title: 10/10/12

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:** 213 974-4111
- **E-mail:** Molina@lacbos.org

#### Date Stamp
- **California Form 802**
- **Date of Original Filing:**

#### 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:** $27.00
- **Date(s):** 08 22 13
- **Ticket(s)/Pass(es) provided by agency?** Yes [ ] No [x]
- **Was ticket distribution made at the behest of agency official?** No [ ] Yes [x]

#### 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**

<table>
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<tr>
<th>Name of Agency, Department or Unit</th>
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</tbody>
</table>

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

#### C. Name of Outside Organization
- **Number of Ticket(s)/Pass(es)**
  - **Describe the public purpose made pursuant to the agency's policy**
  - **Provides services to seniors.**

<table>
<thead>
<tr>
<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>Lincoln Heights Senior Citizen Center 2323 Workman St, Los Angeles, CA 90031</td>
<td>10</td>
<td>Per Ticket Policy ()</td>
</tr>
</tbody>
</table>

#### 4. Verification
- **Signature of Agency Head or Designee:**
- **Print Name:** Avianna Uribe
- **Title:** Ticket Administrator
- **Date (Month, Day, Year):** 10/10/17

### 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
   First District
   Avianna Uribe, Ticket Administrator
   Molina@lacbos.org

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 $27.00
   Date(s): 08 22 13
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [x]
   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.
<table>
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<tr>
<th>Name of Agency, Department or Unit</th>
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<td>Ceremonial Role [x] Other [ ] Income [ ]</td>
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<tr>
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<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
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<tr>
<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>Montecito Heights Senior Center 4545 Homer St., Los Angeles, CA 90031</td>
<td>12</td>
<td>Per Ticket Policy ()</td>
</tr>
<tr>
<td>Provides services to seniors.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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)
   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: (213) 974-4111
   E-mail: Molina@lacbos.org

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 $27.00
   Date(s): 08 22 13
   Ticket(s)/Pass(es) provided by agency? Yes [x] No [ ]
   If no: LA Philharmonic
   If yes: Supervisor Gloria Molina
   Official's Name (Last, First)
   Was ticket distribution made at the behest of agency official? Yes [x] No [ ]

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 [x] 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
      West Covina Improvement Assoc.
      1406 S. Saint Malo St., West Covina, CA 91790
      30 Per Ticket Policy (i)
      Community organization.

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: [Signature]
   Print Name: Avianna Uribe
   Title: Ticket Administrator
   Date: 10/10/13
   Comment: [Comment]

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