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 Disney Hall
   Face Value of Each Ticket/Pass $99.00
   Date(s) 02 14 14
   Ticket(s)/Pass(es) provided by agency? Yes [X] 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
      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
      Evangelical Formosan Church
      9537 Telstar Ave., #101, El Monte, CA 91731
      2 Per Ticket Policy 5.3 (i)

   Provides community services

4. Verification
   I have read and understand FPPC Regulations 19244 and 18942. I have verified that the distribution set forth above is in accordance with the requirements.
   Avianna Uribe
   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 ☑ No ☐
   Event Description: Concert at Disney Hall
   Face Value of Each Ticket/Pass: $168.00
   Date(s): 02/14/14
   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.

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

<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 ☐ Other ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Income ☐</td>
</tr>
</tbody>
</table>

<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>Evangelical Formosan Church 9537 Telstar Ave., #101, El Monte, CA 91731</td>
<td>2</td>
<td>Per Ticket Policy 5.3 (i)</td>
</tr>
<tr>
<td>Provides community services</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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
   Date (Month, Day, Year)
   3/14/19

   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

2. Function or Event Information
   Does the agency have a ticket policy? Yes [x] No [ ]
   Event Description: Concert at Disney Hall
   Face Value of Each Ticket/Pass $99.00
   Date(s): 02 15 14
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [x]
   If no: LA Philharmonic
   Name of Source:
   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
      Date of Birth
      Number of Ticket(s)/Pass(es)
      Ceremonial Role [ ] Other [ ] Income [x]
      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

   Little Tokyo Public Safety Association
   307 East 1st Street, Los Angeles, CA 90012
   2
   Per Ticket Policy 5.3 (i)
   Provides community 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: Avianna Uribe
   Print Name: Ticket Administrator
   Title: (Month, Day, Year) 3/4/19

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@lacobos.org

2. Function or Event Information
Does the agency have a ticket policy? [Yes] [No] Yes ☑ No ☐
Event Description Concert at Disney Hall
Provide Title/Explanation
Ticket(s)/Pass(es) provided by agency? [Yes] [No] Yes ☑ No ☐
Was ticket distribution made at the behest of agency official? [No] [Yes] No ☐ Yes ☑
Face Value of Each Ticket/Pass $168.00
Date(s) 02 20 14
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
(Use, Prev)
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
Evangelical Formosan Church
9537 Telstar Ave., #101, El Monte, CA 91731 ☐
2 Per Ticket Policy 5.3 (i)
Provides community services

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.

Signature of Agency Head or Designee
Avianna Uribe
Print Name
Ticket Administrator
Title
(Month, Day, Year)
3/4/14
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
   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 Disney Hall
   Face Value of Each Ticket/Pass $99.00
   Date(s): 02-20-14
   Ticket(s)/Pass(es) provided by agency? Yes [X] No [ ]
   Name of Supplier: LA Philharmonic
   If yes: Supervisor Gloria Molina
   Official's Name (Last, First)

3. 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
      (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:
      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
      Evangelical Formosan Church
      9537 Telfair Ave., #101, El Monte, CA 91731
      2 Per Ticket Policy 5.3 (i)
      Provides community services

4. Verification
   I have read and understand FPPC Regulations 19344 and 19346. 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

<table>
<thead>
<tr>
<th><strong>1. Agency Name</strong></th>
<th><strong>Date Stamp</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Los Angeles County Board of Supervisors</td>
<td>California Form 802</td>
</tr>
<tr>
<td>Division, Department, or Region (If Applicable)</td>
<td>For Official Use Only</td>
</tr>
<tr>
<td>First District</td>
<td></td>
</tr>
<tr>
<td>Designated Agency Contact (Name, Title)</td>
<td>Date of Original Filing: (Month, Day, Year)</td>
</tr>
<tr>
<td>Avianna Uribe, Ticket Administrator</td>
<td></td>
</tr>
<tr>
<td>Area Code/Phone Number</td>
<td>Amendment (Must provide explanation in Part I)</td>
</tr>
<tr>
<td>(213) 974-4111</td>
<td></td>
</tr>
<tr>
<td>E-mail</td>
<td></td>
</tr>
<tr>
<td><a href="mailto:Molina@lacbos.org">Molina@lacbos.org</a></td>
<td></td>
</tr>
</tbody>
</table>

## 2. Function or Event Information

<table>
<thead>
<tr>
<th>Does the agency have a ticket policy?</th>
<th>Yes [x] No [ ]</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Event Description</strong></td>
<td>Concert at Disney Hall</td>
</tr>
<tr>
<td><strong>Provide Title/Explanation</strong></td>
<td></td>
</tr>
<tr>
<td><strong>Face Value of Each Ticket/Pass $</strong></td>
<td>$168.00</td>
</tr>
<tr>
<td><strong>Date(s)</strong></td>
<td>02 21 14</td>
</tr>
<tr>
<td><strong>If no:</strong></td>
<td>LA Philharmonic</td>
</tr>
<tr>
<td><strong>Name of Source</strong></td>
<td></td>
</tr>
<tr>
<td><strong>If yes:</strong></td>
<td>Supervisor Gloria Molina</td>
</tr>
<tr>
<td><strong>Official's Name (Last, First)</strong></td>
<td></td>
</tr>
</tbody>
</table>

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


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


<table>
<thead>
<tr>
<th><strong>C. Name of Outside Organization (include address and description)</strong></th>
<th><strong>Number of Ticket(s)/Pass(es)</strong></th>
<th><strong>Describe the public purpose made pursuant to the agency's policy</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Brooklyn &amp; Boyle Newspaper 2003 East 1st Street, Los Angeles, CA 90033</td>
<td>2</td>
<td>Per Ticket Policy 5.3 (i)</td>
</tr>
<tr>
<td>Community publication.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

## 4. Verification

I have read and understand FPPC Regulations 19246.1 and 19249.2. 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: [Title]
(Month, Day, Year) 3/14/19

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 ☑ No ☐
   Face Value of Each Ticket/Pass $99.00
   Event Description: Concert at Disney Hall
   Date(s) 02/21/14
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   LA Philharmonic
   Name of Source
   Was ticket distribution made at the behest of agency official? Yes ☑ No ☐
   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 ☑
      Per Ticket Policy 5.3 (h)
      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

4. Verification
   I have read and understand FPPC Regulations 19244.1 and 19242. 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
   Date 3/4/14
   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

### Date Stamp
California Form 802
For Official Use Only

### Amendment
(Must provide explanation in Part 3)

### Date of Original Filing

---

### 2. Function or Event Information

- **Does the agency have a ticket policy?** Yes [x] No [ ]

- **Event Description**
  - Concert at Disney Hall

- **Face Value of Each Ticket/Pass** $99.00

- **Date(s)** 02 22 14

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

- **Name of Source**
  - LA Philharmonic

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

- **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

<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></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>Ceremonial Role [ ] Other [ ] Income [ ]</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>

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

<table>
<thead>
<tr>
<th>Maravilla Business Association 4519 E. Cesar Chavez Ave., L.A., CA 90022</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Per Ticket Policy 5.3 ( )</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Community organization.</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### 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.

---

<table>
<thead>
<tr>
<th>Signature of Agency Head or Designee</th>
<th>Print Name</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Avianna Uribe</td>
<td>Ticket Administrator</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Comment:</th>
<th></th>
</tr>
</thead>
</table>
### 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@labcos.org

**Date Stamp**

**Amendment** (Must provide explanation in Part 1.)

**Date of Original Filing**

### 2. Function or Event Information

- **Does the agency have a ticket policy?** Yes [x] No [ ]
- **Event Description**
  - Concert at Disney Hall
  - Provide Title/Explanation

- **Face Value of Each Ticket/Pass** $99.00
- **Date(s)**
  - 02 23 14

- **Ticket(s)/Pass(es) provided by agency?** Yes [ ] No [x]
- **Name of Source**

- **Was ticket distribution made at the behest of agency official?** Yes [x] No [ ]
- **Official's Name (Last, First)**

### 3. 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**
  - (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**

### 4. Verification

I have read and understand FPPC Regulations 19544.1 and 19842. 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**
3/4/14

**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 ☐
Face Value of Each Ticket/Pass $168.00
Event Description Concert at Disney Hall
Date(s) 02 24 14
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>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>Board of Supervisors Employee</td>
<td>2</td>
<td>Per Ticket Policy 5.3 (k)</td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 19644.1 and 19432. 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 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

---

### Function or Event Information

**Does the agency have a ticket policy?**

- Yes [X]
- No [ ]

- **Face Value of Each Ticket/Pass:** $99.00

- **Event Description:** Concert at Disney Hall

- **Date(s):** 02 24 14

- **Ticket(s)/Pass(es) provided by agency?**

- Yes [ ]
- No [X]

- **If no:** LA Philharmonic

- **Name of Source:**

- **Official’s Name (Last, First):**

---

### 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>Board of Supervisors Employee</td>
<td>2</td>
<td>Per Ticket Policy 5.3 (k)</td>
</tr>
</tbody>
</table>

#### B. Name of Individual (Last, First)

<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 [ ] Other [ ] Income [ ]</td>
</tr>
</tbody>
</table>

* If checking “Ceremonial Role” or “Other” describe below:

#### C. Name of Outside Organization

<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>
</table>

---

### 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: 

(3/4/14)  
(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 Original Filing: (Month, Day, Year)

2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No ☐
Event Description
Concert at Disney Hall
Provide Title/Explanation of Event
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
Was ticket distribution made at the behest of agency official? Yes ☑ 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

<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>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
</table>

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>
</table>

Provides community services.

4. Verification
I have read and understand FPPC Regulations 19244.1 and 19632. 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, 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 of Original Filing: (Month, Day, Year)

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

Event Description
Concert at Disney Hall

Face Value of Each Ticket/Pass $99.00

Date(s)
02 25 14

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

If no: LA Philharmonic

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

<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

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

Number of Ticket(s)/Pass(es)

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

<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>St. Lorenzo Ruiz Catholic Church 747 Meadow Pass Road, Walnut, CA 91789</td>
<td>2</td>
<td>Per Ticket Policy 5.3 (i)</td>
</tr>
</tbody>
</table>

Provides community services.

4. Verification
I have read and understand FPPC Regulations 19644.1 and 19642; 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 [ ]
Face Value of Each Ticket/Pass $168.00
Event Description: Concert at Disney Hall
Date(s): 02 26 14
Ticket(s)/Pass(es) provided by agency? Yes [X] No [ ]
If no: LA Philharmonic
If yes: Supervisor Gloria Molina
Was ticket distribution made at the behest of agency official? Yes [X] No [ ]
Name of Event: (Required)
Name of Source: (Required)
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 [X] Income [ ]
If checking “Ceremonial Role” or “Other” describe below:
Ceremonial Role [ ] Other [X] Income [ ]
If checking “Ceremonial Role” or “Other” describe below:

C. Name of Outside Organization
Number of Ticket(s)/Pass(es)
Describe the public purpose made pursuant to the agency’s policy
Azusa Cares
213 E. Foothill Blvd., Azusa, CA 91702
2 Per Ticket Policy 5.3 (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.
Avianna Uribe
Ticket Administrator

Comment:

Signature of Agency Head or Designee
Print Name
Title
(Month, Day, Year)

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 Disney Hall
   - **Face Value of Each Ticket/Pass:** $99.00
   - **Date(s):** 02/26/14
   - **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**
   - 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 [x] 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

   Concerned Neighbors of El Sereno
   5453 Alhambra Ave., Los Angeles, CA 90032
   - Number of Ticket(s)/Pass(es): 2
   - Per Ticket Policy 5.3 (i)

4. **Verification**
   - I have read and understand FPPC Regulations 19244.1 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:** 3/4/14

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
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 [X] No [ ]

Event Description Concert at Disney Hall
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 $99.00
Date(s) 02 27 14

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:

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

La Puente Artwalk
16352 Glenhope Drive, La Puente 91744
2 Per Ticket Policy 5.3 (l)

Community organization:

4. Verification
I have read and understand FPPC Regulations 19444 and 19445. I have verified that the distribution set forth above, is in accordance with the requirements.

By: [Signature] Avianna Uribe Ticket Administrator
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 [x] No [ ] 
Face Value of Each Ticket/Pass $99.00 
Event Description Concert at Disney Hall 
Provide Title/Explanation 
Date(s) 02 28 14 
Ticket(s)/Pass(es) provided by agency? Yes [ ] No [x] 
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(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>Name of Individual</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Ceremonial Role [x] Other [ ] Income [ ]</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Ceremonial Role [x] Other [ ] Income [ ]</th>
</tr>
</thead>
<tbody>
<tr>
<td>Maravilla Business Association 4519 E. Cesar Chavez Ave., L.A., CA 90022</td>
<td>2 Per Ticket Policy 5.3 (i)</td>
<td></td>
</tr>
<tr>
<td>Community organization.</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: 
Date (Month, Day, Year) 3/4/17 

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
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@labcos.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 [x] No [ ]
Event Description [Dress Rehearsal of L.A. Dance Project]
Provide Title/Explanation
Face Value of Each Ticket/Pass $20.00
Date(s) 02 19 14
Ticket(s)/Pass(es) provided by agency? Yes [ ] No [x]
If no: L.A. Dance Project
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
Ramona Hall Community Center - Ballet CoCo 4580 N. Figueroa St., Los Angeles, CA 90065 14 Per Ticket Policy 5.3 (i)
Community dance class.

4. Verification
I have read and understand FPPC Regulations 19444 and 19442. 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
Date (Month, Day, Year)

Comment:

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)