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 $36.00  
Event Description Hollywood Bowl Opening Night  
Provide Title/Explanation  
Date(s)  
06 21 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.  
A. Name of Agency, Department or Unit  
Number of Ticket(s)/Pass(es)  
Describe the public purpose made pursuant to the agency's policy  
Board of Supervisors Employee  
2  
Per Ticket Policy 5.3 (k)  

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 18944.1 and 18942. 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)  
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 $36.00
   Event Description: Hollywood Bowl Opening Night
   Date(s): 06/21/14
   Ticket(s)/Pass(es) provided by agency? Yes □ No ☑
   If no: LA Philharmonic
   If yes: Supervisor Gloria Molina
   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 | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency’s policy
   Board of Supervisors Employee | 2 | Per Ticket Policy 5.3 (k)

   B. Name of Individual (Last, First) | Number of Ticket(s)/Pass(es) | Identify one of the following:
   Avianna Uribe |  | Ceremonial Role ☐ Other ☑ Incomplete ☐
   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 18344.1 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: 06/30/14

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 [ ]
Face Value of Each Ticket/Pass $36.00
Event Description Hollywood Bowl Opening Night
Provide Title/Explanation
Date(s) 06 21 14
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.

<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>

<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>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role [ ] Other [ ] 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>
</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:
### 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 ☑ No ☐
- Event Description: Hollywood Bowl Opening Night
- Face Value of Each Ticket/Pass: $36.00
- Date(s): 06 21 14
- Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
- Was ticket distribution made at the behest of agency official? Yes ☑ No ☐
- If yes: Supervisor Gloria Molina

**3. Recipients**
- **A. Name of Agency, Department or Unit**
  - Board of Supervisors Employee
  - Number of Ticket(s)/Pass(es): 2
  - Describe the public purpose made pursuant to the agency’s policy:
    - Per Ticket Policy 5.3 (k)

- **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 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
- Print Name: Ticket Administrator
- Title:
- (Month, Day, Year): 6/30/14
- 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 [x] No [☐]
Event Description Hollywood Bowl Opening Night
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 $36.00
Date(s) 06 21 14
If no: LA Philharmonic
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>
<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>

<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>
<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>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>

**4. Verification**
I have read and understand FPCC Regulations 18944.1 and 18942. 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)
6/30/14

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

Date Stamp
California Form 802
For Official Use Only

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

Event Description Hollywood Bowl Opening Night

Face Value of Each Ticket/Pass $36.00

Date(s) 06-21-14

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

If no: LA Philharmonic

If yes: Supervisor Gloria Molina

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 Number of Ticket(s)/Pass(es) Describe the public purpose made pursuant to the agency's policy

| Board of Supervisors Employee | 4 | Per Ticket Policy 5.3 (k) |

B. Name of Individual Number of Ticket(s)/Pass(es)

<table>
<thead>
<tr>
<th>Ceremonial Role</th>
<th>Other</th>
<th>Income</th>
</tr>
</thead>
</table>

C. Name of Outside Organization (Include address and description) Number of Ticket(s)/Pass(es)

<table>
<thead>
<tr>
<th>Ceremonial Role</th>
<th>Other</th>
<th>Income</th>
</tr>
</thead>
</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 Print Name Title
Avianna Uribe Ticket Administrator

Date (Month, Day, Year) 6/30/14

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

<table>
<thead>
<tr>
<th>Los Angeles County Board of Supervisors</th>
</tr>
</thead>
</table>

**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

<table>
<thead>
<tr>
<th>Does the agency have a ticket policy?</th>
<th>Yes [X] No [ ]</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Face Value of Each Ticket/Pass</strong></td>
<td>$36.00</td>
</tr>
<tr>
<td><strong>Event Description</strong></td>
<td>Hollywood Bowl Opening Night</td>
</tr>
<tr>
<td><strong>Date(s)</strong></td>
<td>06 21 14</td>
</tr>
<tr>
<td><strong>Ticket(s)/Pass(es) provided by agency?</strong></td>
<td>Yes [ ] No [X]</td>
</tr>
<tr>
<td><strong>Was ticket distribution made at the behest of agency official?</strong></td>
<td>No [ ] Yes [X]</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.

### 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>4</td>
<td>Per Ticket Policy 5.3 (k)</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 [ ] Other [ ]</td>
</tr>
<tr>
<td></td>
<td></td>
<td>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>

## 4. Verification

I have read and understand FPPC Regulations 18244.1 and 18242. 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)

6/30/14

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

   Date Stamp
   California Form 802
   For Official Use Only

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

   Event Description
   Hollywood Bowl Opening Night

   Face Value of Each Ticket/Pass $36.00

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

   Date(s)
   06 / 21 / 14

   If no:
   LA Philharmonic

   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.

   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy
      Board of Supervisors Employee
      4
      Per Ticket Policy 5.3 (k)

   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
      Other [ ] Income [ ]
      If checking "Ceremonial Role" or "Other" describe below:

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
   Title

   Comments:

   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
   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 
   Face Value of Each Ticket/Pass $36.00
   Event Description Hollywood Bowl Opening Night
   Date(s) 06 21 14
   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
      Board of Supervisors Employee 4 Per Ticket Policy 5.3 (k)

   B. Name of Individual (Use for)
      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 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 [ ]

**Face Value of Each Ticket/Pass** $36.00

**Event Description**
Hollywood Bowl Opening Night

**Date(s)**
06 21 14

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

**If no:**
LA Philharmonic

**Name of Source**

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

**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.*

#### 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>4</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 (Include address and description)

<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>

### 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)**
[6 30 / 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/ E-mail
(213) 974-4111 Molina@lacbos.org

### Date Stamp

### California Form 802
A Public Document

### Amendment (Must provide explanation in Part 2)

### Date of Original Filing:

### 2. Function or Event Information

#### Does the agency have a ticket policy?
Yes ☑ No ☐

#### Face Value of Each Ticket/Pass $36.00

#### Event Description
Hollywood Bowl Opening Night

Provide Title/Explanation

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

#### If no:
LA Philharmonic

#### If yes:
Supervisor Gloria Molina

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

### 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
Board of Supervisors Employee

#### Number of Ticket(s)/Pass(es)
4

#### Describe the public purpose made pursuant to the agency's policy
Per Ticket Policy 5.3 (k)

#### 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

### 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)

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 ☐
   Face Value of Each Ticket/Pass $36.00
   Event Description Hollywood Bowl Opening Night
   Date(s) 06 21 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.

   A. Name of Agency, Department or Unit | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency’s policy
   Board of Supervisors Employee | 4 | Per Ticket Policy 5.3 (k)

   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 18441 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)
   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 Hollywood Bowl Opening Night
Provide Title/Explanation
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 $36.00
Date(s) 06 21 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
Board of Supervisors Employee 4 Per Ticket Policy 5.3 (k)

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:


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 Toll-Free Helpline: 866/ASK-FPPC (866/276-7772)
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: Hollywood Bowl Opening Night
   Provide Title/Explanation
   Face Value of Each Ticket/Pass $36.00
   Date(s) 06 21 14
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [X]
   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
      Board of Supervisors Employee 4 Per Ticket Policy 5.3 (k)

   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

4. Verification
   I have read and understand FPPC Regulations 19444.1 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

Date Stamp
California Form 802
For Official Use Only

 Amendement (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 Hollywood Bowl Opening Night
Provide Title/Explaination

Face Value of Each Ticket/Pass $36.00

Date(s) 06 21 14

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

Board of Supervisors Employee 4 Per Ticket Policy 5.3 (k)

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


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  6/30/14

Signature of Agency Head or Designee  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 Hollywood Bowl Opening Night
Provide Title/Explaination
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 $36.00
Date(s) 06 21 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
Board of Supervisors Employee 4 Per Ticket Policy 5.3 (k)

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:


4. Verification
I have read and understand FPPC Regulations 18344.1 and 18942. 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:
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 Hollywood Bowl Opening Night

Face Value of Each Ticket/Pass $36.00

Date(s) 06 21 14

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

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

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.

<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>11</td>
<td>Per Ticket Policy 5.3 (k)</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)

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 [x] Face Value of Each Ticket/Pass $99.00
   Event Description Concert at Disney Hall
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [ ]
   Was ticket distribution made at the behest of agency official? No [ ] Yes [x]
   Date(s) 06 01 14
   If no: LA Philharmonic
   Name of Source
   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:
   
   Jacques, Carol 2 Ceremonial Role [ ] Other [x] Income [ ]
   Per Ticket Policy 5.3 (h)
   If checking “Ceremonial Role” or “Other” describe below:
   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
   

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
   (Molth, 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
California Form 802
For Official Use Only
Amendment (Must provide explanation in Part 5)
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 Disney Hall
Provide Title/Explanation
Face Value of Each Ticket/Pass $ 99.00
Date(s)
06 28 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.

A. Name of Agency, Department or Unit Number of Ticket(s)/Pass(es) Describe the public purpose made pursuant to the agency's policy
Board of Supervisors Employee 2 Per Ticket Policy 5.3 (k)

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


4. Verification
I have read and understand FPPC Regulations 19944.1 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 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

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 [ ]
Face Value of Each Ticket/Pass $168.00
Event Description Concert at Disney Hall
Provide Title/Explanation
Date(s)
06 28 14
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
Board of Supervisors Employee 2 Per Ticket Policy 5.3 (k)

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

4. Verification
I have read and understand FPPC Regulations 18244.1 and 18242. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee Date
Avianna Uribe [ ] 4/30/16

Print Name Title
Ticket Administrator (Month, Day, Year)

Comment:

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