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 $24.00
Event Description Concert at Hollywood Bowl
[Provide Title/Explanation]
Date(s) 07 09 14
Ticket(s)/Pass(es) provided by agency? [Yes] [No]  
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.

<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>
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<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>
</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>Angelus Plaza Seniors Retire. Housing Found.</td>
<td>30</td>
<td>Per Ticket Policy 5.3 (i)</td>
</tr>
<tr>
<td>255 S. Hill St., #317, LA, CA 90012</td>
<td></td>
<td></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 19644.1 and 1942. 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: 7/3/14

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

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: $24.00
   Date(s): 07 09 14
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [x]
   If no: LA Philharmonic
   Name of Source: Supervisor Gloria Molina
   If yes: Official's Name (Last, First)
   Was ticket distribution made at the behast 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 & Last, First
      Number of Ticket(s)/Pass(es)
      Identity one of the following:
      - Ceremonial Role [ ]
      - Other [ ]
      - Income [ ]
      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
      Barrio Planners - Comm. Youth Center
      5271 E. Beverly Blvd., Los Angeles, CA 90022
      28 Per Ticket Policy 5.3 (i)

      Provides youth services.

4. Verification
   I have read and understand FPPC Regulations 19944 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: [ ]
   Date: 7/14/31

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

1. **Agency Name**
   Los Angeles County Board of Supervisors
   Divison, 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@iacbos.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 $32.00
   Date(s) 07 09 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></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>Ceremonial Role Other Income</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></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>Ceremonial Role Other Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Barrio Planners - Comm. Youth Center 5271 E. Beverly Blvd., Los Angeles, CA 90022</td>
<td>2</td>
<td>Per Ticket Policy 5.3 (i)</td>
</tr>
<tr>
<td>Provides youth 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  
   Print Name: Molina  
   Title: Ticket Administrator  
   Date (Month, Day, Year): 7/31/14

   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

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

Date Stamp California Form 802
A Public Document
For Official Use Only
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 [X]
Face Value of Each Ticket/Pass $24.00
Event Description [Concert at Hollywood Bowl]
Provide Title/Explanation
Date(s) 07 09 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>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>
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<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>
<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>Bilingual Foundation of the Arts 421 N. Avenue 19, Los Angeles, CA 90031</td>
<td>30</td>
<td>Per Ticket Policy 5.3 (i)</td>
</tr>
<tr>
<td>Provides education &amp; training in the field of performing arts for low-income constituents. [ ]</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Verification
I have read and understand FPPC Regulations 19344. 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
7/31/19
(Month, Day, Year)

Comment:

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

1. Agency Name

Los Angeles County Board of Supervisors

Division, Department, or Region (If Applicable)

First District

Designated Agency Contact (Name, Title)

Avianna Uribe, Ticket Administrator

Area Code/Phone Number E-mail

(213) 974-4111 Molina@lacbos.org

2. Function or Event Information

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

Event Description Concert at Hollywood Bowl Provide Title/Explanation

Face Value of Each Ticket/Pass $32.00

Date(s) 07 09 14

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

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

If no: LA Philharmonic

If yes: Supervisor Gloria Molina

Name of Source 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:

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

Chinatown Business Improvement District 727 N. Broadway Ave., Los Angeles, CA 90012-a 30 Per Ticket Policy 5.3 (i)

Non-profit community organization

4. Verification

I have read and understand FPPC Regulations 19844.1 and 19842. 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)

7/31/11

Comment:

FPPC Form 802 (4/12)
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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 ☑ No ☑
   Face Value of Each Ticket/Pass $32.00
   Event Description: Concert at Hollywood Bowl
   Date(s) 07/09/14
   Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☑
   If no: LA Philharmonic
   Was ticket distribution made at the behest of agency official? No ☑ Yes ☑
   If yes: Supervisor Gloria Molina

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

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

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

   C. Name of Outside Organization (include address and description) | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency's policy
   East Los Angeles Chamber of Commerce 4716 E. Cesar Chavez Ave., LA, CA 90022 30 Per Ticket Policy 5.3 (i)
   Non-profit volunteer committee.

4. Verification
   I have read and understand FPPC Regulations 10944, 1 and 1944. 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

Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/276-7772)
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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

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 $32.00
Date(s) 07/09/14

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

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

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

Los Angeles Community Action Network 530 S. Main St., Los Angeles, CA 90013 30 Per Ticket Policy 5.3 (i)

Provides services to the community.

4. Verification
I have read and understand FPPC Regulations 19444 and 19448. I have verified that the distribution set forth above, is in accordance with the requirements.

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

(Title) (Month, Day, Year)

Comment:

FPPC Form 802 (4/12)
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Ceremonial Role Events and Ticket/Pass Distributions

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   Los Angeles County Board of Supervisors
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   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: $32.00
   Event Description: Concert at Hollywood Bowl
   Date(s): 07 09 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
   A. Name of Agency, Department or Unit
   B. Name of Individual
   C. Name of Outside Organization (include address and description)

4. Verification
   I have read and understand FPPC Regulations 19444.1 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: 7/31/14
   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

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** $29.00
   **Date(s)** 07 24 14

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

   **Was ticket distribution made at the behest of agency official?** [No ☐ Yes ☑️]
   If yes: Supervisor Gloria Molina

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

   **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
   Boyle Heights Neighborhood Council 2130 E. 1st Street, #110, LA, CA 90033
   30 Per Ticket Policy 5.3 (i)

   Community organization.

4. **Verification**
   I have read and understand FPPC Regulations 19644.1 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**
   (Month, Day, Year)

   7/31/14

   **Comment:**

   FPPC Form 802 (4/12)
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   - 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 Hollywood Bowl
   - Face Value of Each Ticket/Pass $29.00
   - Date(s) 07 24 14
   - Ticket(s)/Pass(es) provided by agency? Yes [ ] No [X]
   - Was ticket distribution made at the behest of agency official? Yes [X] No [ ]
   - L.A. Philharmonic
   - Name of Source: 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>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>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
<tr>
<td></td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
</tbody>
</table>

   **C. Name of Outside Organization**
<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>Chinese Historical Society</td>
<td>Per Ticket Policy 5.3 (i)</td>
</tr>
<tr>
<td>411 Bernard St., Los Angeles, CA 90012</td>
<td></td>
</tr>
<tr>
<td>Community organization.</td>
<td></td>
</tr>
</tbody>
</table>

4. **Verification**
   - I have read and understand FPPC Regulations 18044 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.
   - Signature of Agency Head or Designee: [ ]
   - Date (Month, Day, Year): 7/31/14
   - Avianna Uribe, Ticket Administrator
   - Print Name: [ ]
   - Title: [ ]

   Comment: [ ]

FPPC Form 802 (4/12)
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Avianna Uribe, Ticket Administrator
Area Code/Phone Number E-mail
(213) 974-4111 Molina@lacobos.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
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 $29.00
Date(s) 07 24 14
LA Philharmonic
Name of Recipient
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 (First, Last) 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

Communities for a Better Environment 6325 Pacific Blvd., #300, Huntington Park, CA 18 Per Ticket Policy 5.3 (I)
Non-profit environmental organization

4. Verification
I have read and understand FPPC Regulations 10944.1 and 1942. 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:

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First District

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Avianna Uribe, Ticket Administrator

Area Code/Phone Number: (213) 974-4111
E-mail: Molina@lacity.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: $29.00
Date(s): 07-24-14

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

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

<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 (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>
<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>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>El Sereno Hillside Federation of Seniors 4495 Gateside Drive, LA, CA 90032</td>
<td>50 Per Ticket Policy 5.3 (i)</td>
<td></td>
</tr>
<tr>
<td>Provides services to seniors.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Verification
I have read and understood FPPC Regulations 18644.1 and 18642. 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

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 Hollywood Bowl

Face Value of Each Ticket/Pass  $29.00

Date(s)  07  24  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


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

El Sereno Historical Society
Post Box 32-113, Los Angeles, CA 90032  8  Per Ticket Policy 5.3 (i)

Community organization

4. Verification

I have read and understood FPPC Regulations 15944.1 and 15942. 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:

Signature of Agency Head or Designee
Avianna Uribe  Ticket Administrator

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
- Division, Department, or Region: First District
- Designated Agency Contact: 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 [x]
- Event Description: Concert at Hollywood Bowl
- Face Value of Each Ticket/Pass: $22.00
- Date(s): 07 24 14
- Ticket(s)/Pass(es) provided by agency? Yes [x] No [ ]
- If no: LA Philharmonic
- Name of Source: Supervisor Gloria Molina
- 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

<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</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>

#### C. Name of Outside Organization

<table>
<thead>
<tr>
<th>Name of Outside Organization</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>Florence Firestone/Walnut Park Cham. of Com</td>
<td>30</td>
<td>Per Ticket Policy 5.3 (i)</td>
</tr>
</tbody>
</table>

Non-profit volunteer committee.

### 4. Verification
- I have read and understand FPPC Regulations 18944.1 and 18949. 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: 7/31/14
- 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

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Event Description
   Concert at Hollywood Bowl
   Date(s) 07 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></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 ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking “Ceremonial Role” or “Other” describe below:</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
<tr>
<td></td>
<td></td>
<td>If checking “Ceremonial Role” or “Other” 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>
<tbody>
<tr>
<td>Highland Park Heritage Trust, P.O. Box 50894, Los Angeles, CA 90042</td>
<td>26</td>
<td>Per Ticket Policy 5.3 (i)</td>
</tr>
<tr>
<td>Non-profit volunteer committee.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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

   Signature of Agency Head or Designee: Avianna Uribe
   Print Name: Ticket Administrator
   Title:
   Date (Month, Day, Year): 7/31/17
   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
   - Designated Agency Contact (Name, Title): Avianna Uribe, Ticket Administrator
   - Area Code/Phone Number E-mail: (213) 974-4111 Molina@laalmost.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 $29.00
   - Date(s): 07  24  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? 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**
     - (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:
     - Pacesetters
     - 542 Casada Canyon, Monterey Park, CA 91752
     - 30
     - Per Ticket Policy 5.3 (i)
   - Community organization

4. **Verification**
   - I have read and understand FPPC Regulations 18944.1 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
   - Ticket Administrator
   - (Month, Day, Year): 7/31/14
   - Comment:

   FPPC Form 802 (4/212)
   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@lacsos.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 $29.00
   Date(s) 07 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.

   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:
   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 4580 N. Figueroa St, Los Angeles, CA 90065 44 Per Ticket Policy 5.3 (i)
   Offers recreational, physical & cultural opportunities to the community.

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

**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 [x]
- **Event Description** Concert at Hollywood Bowl
- **Face Value of Each Ticket/Pass** $29.00
- **Date(s)** 07/24/14
- **Ticket(s)/Pass(es) provided by agency?** Yes [ ] No [x]
- **If yes, name of source** LA Philharmonic

**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**
- **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**

**St. Hillary Church of Perpetual Adoration**
5465 Citronell Ave., Pico Rivera, CA 90660

**30** Per Ticket Policy 5.3 (i)

**Provides services to the community.**

**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**

**Comment:**

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/276-7772)
Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name

<table>
<thead>
<tr>
<th>Agency Name</th>
<th>Date Stamp</th>
</tr>
</thead>
<tbody>
<tr>
<td>Los Angeles County Board of Supervisors</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Division, Department, or Region (if applicable)</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>First District</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Designated Agency Contact (Name, Title)</th>
<th>Amendment</th>
</tr>
</thead>
<tbody>
<tr>
<td>Avianna Uribe, Ticket Administrator</td>
<td>(Must provide explanation in Part 3)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Area Code/Phone Number</th>
<th>E-mail</th>
<th>Date of Original Filing</th>
</tr>
</thead>
<tbody>
<tr>
<td>(213) 974-4111</td>
<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>Face Value of Each Ticket/Pass</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>$29.00</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Event Description</th>
<th>Date(s)</th>
<th>Ticket(s)/Pass(es) provided by agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Concert at Hollywood Bowl</td>
<td>07 24 14</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>If no:</th>
<th>If:</th>
</tr>
</thead>
<tbody>
<tr>
<td>LA Philharmonic</td>
<td>Supervisor Gloria Molina</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 | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency’s policy |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></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: |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role</td>
</tr>
</tbody>
</table>

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 |
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Walnut Park Residents Association 2723 Broadway St., Walnut Park, CA 90255</td>
<td>4</td>
<td>Per Ticket Policy 5.3 (i)</td>
</tr>
<tr>
<td>Community organization</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Verification

I have read and understand FPPC Regulations 19441.1 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): (7/31/19)
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 [x] No [ ]
   - **Event Description** Concert at Hollywood Bowl
   - **Face Value of Each Ticket/Pass** $22.00
   - **Date(s)** 07 10 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]
   - **Name of Official** 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>
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<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>

   **Section B**
   - **Name of individual**
   - **Number of Ticket(s)/Pass(es)**
   - **Ceremonial Role**
   - **Other**
   - **Income**
   - **Ceremonial Role**
   - **Other**
   - **Income**

<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>Alma Family Services 1000 Corp Center Dr. #650, Monterey Park, CA</td>
<td>30</td>
<td>Per Ticket Policy 5.3 (i)</td>
</tr>
<tr>
<td>Provides community based services.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. **Verification**

   I have read and understand FPPC Regulations 18441 and 18442. I have verified that the distribution set forth above is in accordance with the requirements.

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

   Comment:
   [Signature]

   [Date]

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 888/ASK-FPPC (888/275-7772)
**Agency Report of:**

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

**1. Agency Name**
Los Angeles County Board of Supervisors

**Division, Department, or Region (If Applicable)**

**First District**

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

**Area Code/Phone Number**
(213) 974-4111

**E-mail**
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 [x] No [ ]
- **Event Description**
  - Concert at Hollywood Bowl

**Provide Title/Explanation**

- **Face Value of Each Ticket/Pass $**
  - 29.00

- **Date(s)**
  - 07 10 14

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

- **Yes [ ] No [x]**

- **LA Philharmonic**
  - **Name of Source**: 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**
  - Number of Ticket(s)/Pass(es)
  - Identify one of the following:
    - 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

- **Asian Youth Center**
  - 100 West Clary Ave., San Gabriel, CA 91776
  - 30
  - Per Ticket Policy 5.3 (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**
  - (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
     - Email: 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 $29.00
   - Event Description: Concert at Hollywood Bowl
   - Provide Title/Explanation
   - Date(s): 07 10 14
   - Ticket(s)/Pass(es) provided by agency? Yes [ ] No [X]
   - If no: LA Philharmonic
   - Name of Source: Supervisor Gloria Molina
   - 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
   - Bellevue Recreation Center
     826 Lucille Ave., Los Angeles, CA 90026
   - 30 Per Ticket Policy 5.3 (i)
   - Offers recreational, physical & cultural opportunities to the community.
   - 

4. **Verification**
   - I have read and understand FPPC Regulations 18041, 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  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 ☑ No  

   Event Description
   Concert at Hollywood Bowl

   Face Value of Each Ticket/Pass $
   29.00

   Date(s)
   07 10 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

   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 (Include address and description)
   Number of Ticket(s)/Pass(es)
   Describe the public purpose made pursuant to the agency's policy
   Chinatown Service Center
   767 N. Hill St., Suite 400, LA, CA 90012
   Per Ticket Policy 5.3 (i)

   Provides services to the community.

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
   (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
Face Value of Each Ticket/Pass $ 29.00
Date(s) 07 10 14
Ticket(s)/Pass(es) provided by agency? Yes □ No □
Was ticket distribution made at the behest of agency official? No □ Yes □
LA Philharmonic
Name of Source
 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

B. Name of Individual (Last, First)

C. Name of Outside Organization (Include address and description)
Concerned Neighbors of El Sereno
3118 Lowell Ave., LA, CA 90032

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
(m) (d) (y)

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)

2. **Function or Event Information**
   Does the agency have a ticket policy? [Yes] [No]
   Face Value of Each Ticket/Pass $22.00
   Event Description: Concert at Hollywood Bowl
   Ticket(s)/Pass(es) provided by agency? [Yes] [No]
   Date(s): 07 10 14
   If yes: LA Philharmonic
   If no: Name of Source
   Was ticket distribution made at the behest of agency official? [Yes] [No]
   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
   Eagle Rock Recreation Center
   1100 Eagle Vista Dr., LA, CA 90041
   30 Per Ticket Policy 5.3 (i)
   Offers recreational, physical & cultural opportunities to the community

4. **Verification**
   I have read and understand FPPC Regulations 19641.1 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:
   Date: 7/31/14

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**
   - (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** $22.00
   - **Date(s)** 07 10 14
   - **Event Description** Concert at Hollywood Bowl
   - **Ticket(s)/Pass(es) provided by agency?** Yes [□] No [x]
   - **If no:** LA Philharmonic
   - **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 [□] 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**

   **East Los Angeles Boys & Girls Club**
   - 324 N. McDonnell Ave., LA, CA 90022
   - 30 Per Ticket Policy 5.3 (i)

   **Provides youth services.**

4. **Verification**
   - I have read and understand FPPC Regulations 19641.1 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**
   - (213) 974-4111

   **E-mail**
   - Molina@lacbos.org

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

   **Event Description**
   - Concert at Hollywood Bowl

   **Face Value of Each Ticket/Pass** $22.00

   **Date(s)**
   - 07 10 14

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

   **Was ticket distribution made at the behest of agency official?** 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 (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**
   - Evangelical Formosan Church
   - 9537 Telstar Ave., #101, El Monte, CA 91731

   **Number of Ticket(s)/Pass(es)**
   - 30

   **Describe the public purpose made pursuant to the agency's policy**
   - Per Ticket Policy 5.3 (i)

   Provides services to the community.

4. **Verification**
   - I have read and understood 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**
   - 7/31/14

   **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@lacos.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
Provide Title/Explanation
Face Value of Each Ticket/Pass $29.00
Date(s):
07 10 14

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

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

Number of Ticket(s)/Pass(es)

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

B. Name of Individual

Name of Individual (E.g., Mr., Mrs.):

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):

Hathaway Children and Family Services
840 N. Avenue 66, Los Angeles, CA 90042

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

Describe the public purpose made pursuant to the agency’s policy:

Per Ticket Policy 5.3 (i)

Provides services to children and families.

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: (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
   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: $29.00
   Date(s): 07/10/14
   Name of Source: LA Philharmonic
   Official's Name (Last, First): Supervisor Gloria Molina

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

   A. Name of Agency, Department or Unit | 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
      Highland Park Neighborhood Council 838 N. Avenue 52, LA, CA 90042 [ ] 22 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.
   Signature of Agency Head or Designee: Avianna Uribe
   Print Name: Ticket Administrator
   Title: [ ]
   Date: 07/31/14

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

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]
If no: LA Philharmonic
Name of Source:
If yes: Supervisor Gloria Molina
Official's Name (Last, First)
Face Value of Each Ticket/Pass $22.00
Date(s) 07 10 14

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

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

Highland Park Neighborhood Council
338 N. Avenue 52, LA, CA 90042 8 Per Ticket Policy 5.3 (i)
Community organization.

4. Verification
I have read and understand FPPC Regulations 18944.1 and 18944. 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) 7/31/19

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 [ ]
   - **Face Value of Each Ticket/Pass** $29.00
   - **Date(s) Provided**
     - 07 10 14
   - **Ticket(s)/Pass(es) provided by agency?** Yes [ ] No [X]
   - **Name of Source** LA Philharmonic
   - **Name of Source** 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 purpose 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**
   - Number of Ticket(s)/Pass(es)
   - Describe the purpose made pursuant to the agency's policy
   - Highland Park Senior Citizen Center
     - 6152 N. Figueroa St., LA, CA 90042
     - 30 Per Ticket Policy 5.3 (i)
     - Provides services to seniors.

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: 7/3/17

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

<table>
<thead>
<tr>
<th>1. Agency Name</th>
<th>Los Angeles County Board of Supervisors</th>
</tr>
</thead>
<tbody>
<tr>
<td>Division, Department, or Region (If Applicable)</td>
<td>First District</td>
</tr>
<tr>
<td>Designated Agency Contact (Name, Title)</td>
<td>Avianna Uribe, Ticket Administrator</td>
</tr>
<tr>
<td>Area Code/Phone Number</td>
<td>(213) 974-4111</td>
</tr>
<tr>
<td>E-mail</td>
<td><a href="mailto:Molina@lacbos.org">Molina@lacbos.org</a></td>
</tr>
<tr>
<td>Date Stamp</td>
<td>California Form 802</td>
</tr>
<tr>
<td>Amendment (Must provide explanation in Part 3)</td>
<td></td>
</tr>
<tr>
<td>Date of Original Filing:</td>
<td>(Month, Day, Year)</td>
</tr>
</tbody>
</table>

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 $32.00

Date(s): 07/09/14

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

If yes: 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.

<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

<table>
<thead>
<tr>
<th>Name of individual</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
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</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role [ ] Other [ ]</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</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>A Cleaner Greener ELA</td>
<td>24</td>
<td>Per Ticket Policy 5.3 (i)</td>
</tr>
<tr>
<td>6635 E. Florence Ave., #307, Bell Gardens, CA</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Non-profit organization improving air quality for East Los Angeles by planting trees</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18949. 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
   □ 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 $ 24.00
   Date(s) 07 09 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.

   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

   A Cleaner Greener ELA
   6635 E. Florence Ave., #307, Bell Gardens, CA 6
   Per Ticket Policy 5.3 (i)
   Non-profit organization improving air quality for East Los Angeles by planting trees

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  Print Name  Title
   Avianna Uribe  Ticket Administrator  7/31/14
   (Month, Day, Year)
   Comment