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

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (If Applicable)
   Los Angeles County Arts Commission
   Designated Agency Contact (Name, Title)
   Miriam Gonzalez, Executive Assistant
   Area Code/Phone Number E-mail
   (213) 202-5858 mgonzalez@arts.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes [x] No [ ]
   Face Value of Each Ticket/Pass $70
   Event Description: Backbeat, theatre performance
   Date(s): 13 30 13
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [x]
   If no: Center Theatre Group
   Name of Source
   Was ticket distribution made at the behest of agency official? No [x] Yes [ ]
   If yes: Official’s Name (Last, First)

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

   **A.** Name of Agency, Department or Unit | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency’s policy
   --- | --- | ---
   Arts Commission | 2 | Policy 2.01 5 b - Job duties of the official

   **B.** Name of Individual (last, first) | Number of Ticket(s)/Pass(es) | Identify one of the following:
   | Ceremonial Role [ ] Other [ ] Income [ ]
   | Ceremonial Role [ ] Other [ ] Income [ ]
   | 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
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4. Verification
I have read and understand FPPC Regulations 19645.1 and 19642. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee: [Signature]
Print Name: Miriam Gonzalez
Title: Executive Assistant
(Month, Day, Year): 3/14/13

Comment: [Comment]

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/276-7772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if Applicable)
   Los Angeles County Arts Commission
   Designated Agency Contact (Name, Title)
   Miriam Gonzalez, Executive Assistant
   Area Code/Phone Number / E-mail
   (213) 202-5858 mgonzalez@arts.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes X No □
   Face Value of Each Ticket/Pass $70
   Event Description The Gift, theatre performance
   Date(s) 2 6 13
   Ticket(s)/Pass(es) provided by agency? Yes □ No X
   If no: The Geffen Playhouse
   Name of Source
   Was ticket distribution made at the behest of agency official? No X Yes □
   If yes: Official's Name (Last, First)

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

   A. Name of Agency, Department or Unit | Number of Ticket(s)/Pass(es) | Describe the public purpose made pursuant to the agency's policy
      Arts Commission | 2 | Policy 2.01 5 b - Job duties of the official

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

4. Verification
   I have read and understand FPPC Regulations 19644, 1 and 18642. I have verified that the distribution set forth above, is in accordance with the requirements.
   Miriam Gonzalez, Executive Assistant 3/14/13

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

1. Agency Name
County of Los Angeles

Division, Department, or Region (if Applicable)
Los Angeles County Arts Commission

Designated Agency Contact (Name, Title)
Miriam Gonzalez, Executive Assistant

Area Code/Phone Number / E-mail
(213) 202-5858 / mgonzalez@arts.lacounty.gov

Date Stamp

California Form 802
For Official Use Only

Amendment (Must provide explanation in Part 2)
Date of Original Filing:

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

Event Description
Grapes of Wrath, theatre performance

Face Value of Each Ticket/Pass $ 50
Date(s)
2 / 23 / 13

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

If no:
A Noise Within
Name of Source

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

If yes:
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
Arts Commission 2 Policy 2.01 5 b - Job duties of the official

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.

Miriam Gonzalez, Executive Assistant
3/14/13

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

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

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (If Applicable)
   Los Angeles County Arts Commission
   Designated Agency Contact (Name, Title)
   Miriam Gonzalez, Executive Assistant
   Area Code/Phone Number: (213) 202-5858
   E-mail: mgonzalez@arts.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes[ ] No[ ] Face Value of Each Ticket/Pass $50
   Event Description: Eurydice, theatre performance
   Date(s): 3/16/13
   Ticket(s)/Pass(es) provided by agency? Yes[ ] No[ ]
   Name of Source: A Noise Within
   If no: If yes: Official's Name (Last, First)

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

   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy
      Arts Commission | 2 | Policy 2.015b - Job duties of the official

   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.
   Signature of Agency Head or Designee: __________________________
   Print Name: Miriam Gonzalez
   Title: Executive Assistant
   Date: 3/14/13