

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

A Public Document

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
County of Los Angeles			
Division, Department, or Region (If Applicable)		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: _____ (Month, Day, Year)	
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 No

Event Description: Backbeat, theatre performance
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 \$ 70

Date(s) 1 / 30 / 13

If no: Center Theatre Group
Name of Source

If yes: _____
Official's Name (Last, First)

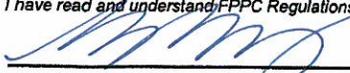
3. Recipients

• 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 <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
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.

	Miriam Gonzalez	Executive Assistant	3/14/13
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(Month, Day, Year)</small>

Comment: _____

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(213) 202-5858	mgonzalez@arts.lacounty.gov		

2. Function or Event Information

Does the agency have a ticket policy? Yes No

Event Description: The Gift, theatre performance
Provide Title/Explanation

Face Value of Each Ticket/Pass \$ 70

Date(s) 2 6 13

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

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

If no: The Geffen Playhouse
Name of Source

If yes: _____
Official's Name (Last, First)

3. Recipients

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Arts Commission	2	Policy 2.01 5 b - Job duties of the official
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	Miriam Gonzalez	Executive Assistant	3/14/13
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2. Function or Event Information

Does the agency have a ticket policy? Yes No

Event Description: Grapes of Wrath, theatre performance
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 \$ 50

Date(s) 2 / 23 / 13

If no: A Noise Within
Name of Source

If yes: _____
Official's Name (Last, First)

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2. Function or Event Information

Does the agency have a ticket policy? Yes No

Event Description: Eurydice, theatre performance
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 \$ 50

Date(s) 3 / 16 / 13

If no: A Noise Within
Name of Source

If yes: _____
Official's Name (Last, First)

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

Comment: _____