Print Form

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

A Public Document

California Form 802

For Official Use Only

Date Stamp

1. Agency Name

Los Angeles County Board of Supervisors

Division, Department, or Region *(if applicable)*

First District

Street Address

500 West Temple Street, Suite 856, Los Angeles, CA 90012

Designated Agency Contact *(Name, Title)*

Joanie Paul - Ticket Administrator

Area Code/Phone Number: 213-974-4111

E-mail: Molina@lacbos.org

☐ Amendment *(Must provide explanation in Part 3.)*

Date of Original Filing: _____ *(month, day, year)*

2. Function, Event, or Ceremonial Role Information

Title _____

Face Value of Each Admission $ 55.00

Description _____

Date(s) 04 / 12 / 12 ___ / ___ / ___

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: LA Dodgers
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☒ No ☐ If yes: Supervisor Gloria Molina
Official's Name (Last, First) and Title

The identity of recipient(s) and the explanation:

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	• Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description. • If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.	
Valentina Martinez	2	Yes ☐ No ☒		Income ☐
		Yes ☐ No ☐		Income ☐
		Yes ☐ No ☐		Income ☐
		Yes ☐ No ☐		Income ☐
		Yes ☐ No ☐		Income ☐

3. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above,

[redacted]nie Paul — Print Name

Ticket Administrator — Title

04/18/12 — *(month, day, year)*

(For any additional information including amendment explanation.)

Promoting public/private facilities for County resident use.