

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

A Public Document

<b>1. Agency Name</b> COUNTY OF LOS ANGELES		Date Stamp	<b>California Form 802</b> For Official Use Only
Division, Department, or Region (If Applicable)  BOARD OF SUPERVISORS			
Designated Agency Contact (Name, Title)  LINDA BALDERRAMA - TICKET ADMINISTRATOR		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)  Date of Original Filing: _____ <small>(Month, Day, Year)</small>	
Area Code/Phone Number 213-974-5555	E-mail FIFTHDISTRICT@LACBOS.ORG		

## 2. Function or Event Information

Does the agency have a ticket policy?    Yes     No     Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 168.00

Event Description LA PHILHARMONIC    Date(s) 04 / 03 / 13 \_\_\_\_\_  
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency?    Yes     No     If no: \_\_\_\_\_  
Name of Source

Was ticket distribution made at the behest of agency official?    No     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
B. Name of Individual <small>(Last, First)</small>	Number of Ticket(s)/Pass(es)	Identify one of the following:
Glasgow, Lori	4	Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> retain quality employees
	.	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 <small>(Include address and description)</small>	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.

	Linda Balderrama	Ticket Administrator	3/14/13
	<small>Print Name</small>	<small>Title</small>	<small>(Month, Day, Year)</small>

Comment: \_\_\_\_\_