

Tickets Provided by Agency Report

A Public Document

TICKETS PROVIDED BY AGENCY REPORT

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
County of Los Angeles			
Division, Department, or Region (if applicable)			
Board of Supervisors			
Street Address			
500 W. Temple St. Room 869, Los Angeles 90012			
Area Code/Phone Number	E-mail	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ <small>(month, day, year)</small>	
213-974-5555	fifthdistrict@lacbos.org		
Agency Contact (name and title)			
Linda Balderrama Ticket Administrator			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 10 / 17 / 10 Description of Event: LA Philharmonic

Face Value of Ticket: \$ 100.00

Agency Event Yes No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: LA Philharmonic

Number of Tickets Received: 2 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Sharon townsend Roth

Name of Individual or Organization: Glendale Foundation for the Retarded Number of Tickets: 2

Description of Organization: Social Services organization for disabled children

Address of Organization: 6512 San Fernando Rd Glendale CA 91201
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
Scholarship fundraiser auction

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

<u>Linda Balderrama</u>	<u>Ticket Administrator</u>	<u>10-12-10</u>
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>
		<small>(month, day, year)</small>

Comment: (Use this space or an attachment for any additional information including amendment explanation.)

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Linda Balderrama Ticket Administrator			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 12 / 14 / 10 Description of Event: LA Philharmonic
 _____ / _____ / _____ Face Value of Ticket: \$ 100.00

Agency Event Yes No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: LA Philharmonic

Number of Tickets Received: 2 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Argonza-Gomez, Theresa	2	Retaining quality employees

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: _____

Name of Individual or Organization: _____ Number of Tickets: _____

Description of Organization: _____

Address of Organization: _____
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

_____ Signature of Agency Head or Designee	<u>Linda Balderrama</u> Print Name	<u>Ticket Administrator</u> Title	<u>12-14-10</u> (month, day, year)
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Agency Contact (name and title)			
Linda Balderrama Ticket Administrator			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 11 / 18 / 10 Description of Event: LA Auto Show

_____ / _____ / _____ Face Value of Ticket: \$ 250.00

Agency Event Yes No (Identify source of tickets below.)

Name of Outside Source of Ticket(s) Provided to Agency: Homeless Health Care Los Angeles

Number of Tickets Received: 5 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution
Antonovich, Mike	5	Promoting intergovernmental relations

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: _____

Name of Individual or Organization: _____ Number of Tickets: _____

Description of Organization: _____

Address of Organization: _____

Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

5. Verification

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Linda Balderrama	Ticket Administrator	12-10-10
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>
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Agency Contact (name and title) Linda Balderrama Ticket Administrator			

2. Event For Which Tickets Were Distributed

Date(s) of Event: 12 / 8 / 10 Description of Event: LA Philharmonic
 _____ / _____ / _____ Face Value of Ticket: \$ 100.00

Agency Event Yes No (Identify source of tickets below.)
 Name of Outside Source of Ticket(s) Provided to Agency: LA Philharmonic
 Number of Tickets Received: 2 Ticket(s) Provided to Agency: Gratuitously Pursuant to Contract

3. Agency Official(s) Receiving Ticket(s) (use a continuation sheet for additional names)

Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Anna Jung

Name of Individual or Organization: Asian Youth Center Number of Tickets: 2

Description of Organization: Youth organization

Address of Organization: 100 W. Clary Ave. San Gabriel CA 91776
Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)
Fundraiser auction

5. Verification

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_____ Signature of Agency Head or Designee	<u>Linda Balderrama</u> Print Name	<u>Ticket Administrator</u> Title	<u>12-10-10</u> (month, day, year)
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_____/_____/_____ Face Value of Ticket: \$ 100.00

Agency Event Yes No (Identify source of tickets below.)

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Name of Official (Last, First)	Number of Tickets	State Whether the Distribution is Income to the Official or Describe the Public Purpose for the Distribution

4. Individual or Organization Receiving Ticket(s) (Provided at the behest of an agency official.)

Name of Behesting Agency Official: Sharon Price

Name of Individual or Organization: Llano Community Association Number of Tickets: 2

Description of Organization: Community organization

Address of Organization: PO Box 7 Llano CA 93544

Number and Street City State Zip Code

Purpose for Distribution: (Describe the public purpose for the distribution to the organization.)

Scholarship fundraiser auction

5. Verification

I have determined that the distribution of tickets set forth above is in accordance with the provisions of FPPC Regulation 18944.1.

Linda Balderrama	Ticket Administrator	12-10-10
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>
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