

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

A Public Document

1. Agency Name		Date Stamp	California Form 802 For Official Use Only
City 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)	
Harbor Dept.			
Street Address			
425 S. Palos Verdes St., San Pedro, CA 90731			
Designated Agency Contact (Name, Title)			
Theresa Adams Lopez, Director of Public Relations			
Area Code/Phone Number	E-mail		
310-732-3508	tadams-lopez@portla.org		

2. Function, Event, or Ceremonial Role Information

Title Chivas Soccer Game Face Value of Each Admission \$ 25.00

Description 15 Vouchers to game Date(s) 6 / 18 / 11

Ticket(s)/Admission(s) provided by agency? Yes No If no: Chivas provided tickets via promotion with Wilm. Waterfront Park Opening
Name of Source _____

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


Yes No If yes: Theresa Adams Lopez, Director of Public Relations
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	<ul style="list-style-type: none"> 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. 	Income
Wilmington YMCA	15	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Community Program within the Harbor Dept.	<input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	jurisdiction - tickets distributed in appreciation	<input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	for YMCA assistance in Harbor Dept. park	<input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	opening	<input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>		<input type="checkbox"/>

3. Verification

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

 Signature of Agency Head or Designee
 Geraldine Knatz Print Name
 Executive Director Title
 JUL 07 2011 (month, day, year)

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