

**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)			
Harbor Department			
Street Address			
425 S. Palos Verdes Street, San Pedro, CA 90731			
Designated Agency Contact (Name, Title)		<input type="checkbox"/> Amendment (Must provide explanation in Part 3.)	
Theresa Adams Lopez, Director of Public Relations		Date of Original Filing: _____ (month, day, year)	
Area Code/Phone Number	E-mail		
310-732-3507	tadams-lopez@portla.org		

2. Function, Event, or Ceremonial Role Information

Title LA Dodger baseball tickets Face Value of Each Admission \$ 120

Description Baseball Game Date(s) 07 / 05 / 11

Ticket(s)/Admission(s) provided by agency? Yes No If no: LA Dodgers rec'd through advertising contract
Name of Source

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

Yes No If yes: Baker, Arley, Sr. Dir. of Communications
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
Baker, Arley; LA Harbor Dept.	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Port promotion - Customer Relations	<input type="checkbox"/>
Thornburg, David; SA Recycling	1	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Port promotion - Customer Relations	<input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>		<input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>		<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.

JUL 11 2011

G. Knatz Signature of Agency Head or Designee
Geraldine Knatz, Ph.D. Print Name
Executive Director Title
 _____ (month, day, year)

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