

**Tickets Provided by Agency Report**

**A Public Document**

TICKETS PROVIDED BY AGENCY REPORT

<b>1. Agency Name</b> OC Fair & Event Center / Pacific Amphitheatre		Date Stamp	<b>California Form 802</b> For Official Use Only
Division, Department, or Region (if applicable) 88 Fair Drive			
Street Address Costa Mesa, CA. 92626			
Area Code/Phone Number 714 708 1500	E-mail dheathman@ocfair.com	<input type="checkbox"/> Amendment (Must explain in Part 5.) Date of Original Filing: _____ (month, day, year)	
Agency Contact (name and title) Dena Heathman			

**2. Event For Which Tickets Were Distributed**

Date(s) of Event: 08 / 12 / 10 Description of Event: LeAnn Rimes  
 \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Face Value of Ticket: \$ 19.50

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

Name of Outside Source of Ticket(s) Provided to Agency: \_\_\_\_\_

Number of Tickets Received: \_\_\_\_\_ 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: Dena Heathman

Name of Individual or Organization: GoCountry Number of Tickets: 10

Description of Organization: Radio Promotions

Address of Organization: 1500 Cotner Ave Los Angeles CA 90025  
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.

Digitally signed by Dena Heathman DN: cn=Dena Heathman, o=OC Fair & Event Center, ou=Administration, email=dheathman@ocfair.com, c=US Date: 2010.08.01 14:54:40 -0700 <b>Dena Heathman</b>	Dena Heathman	Ticket Administrator	8/1/10
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

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

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