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

A Public Document

1. Agency Name
County of Los Angeles
Division, Department, or Region (if applicable)
Board of Supervisors, Fifth District
Designated Agency Contact (Name, Title)
Sandra Cruz, Ticket Administrator
Area Code/Phone Number
(213) 974-5555
E-mail
scruz@bos.lacounty.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☒ No ☐
Face Value of Each Ticket/Pass $ 45.00
Event Description: Dodger Tickets
Provide Title/Explanation
Date(s) 03 / 29 / 18 03 / 30 / 18
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
If no: Los Angeles Dodgers
Name of Source
Was ticket distribution made at the behest of agency official? Yes ☐ No ☒
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)/Passes
Describe the public purpose made pursuant to the agency's policy

B. Name of Individual (Last, First)
Number of Ticket(s)/Passes
Identify one of the following:
Ceremonial Role ☐ Other ☒ Income ☐
Ticket Policy Sec 5.3(k)
If checking "Ceremonial Role" or "Other" describe below:

C. Name of Outside Organization (include address and description)
Number of Ticket(s)/Passes
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.

Sandra Cruz
Ticket Administrator

Comment:

FPCC Form 802 (2/2016)
FPCC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
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Date Stamp California Form 802
For Official Use Only
Date of Original Filing: (month, day, year)

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<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff</td>
<td>2</td>
<td>Ceremonial Role ☐ Other ☒ Income ☐</td>
</tr>
<tr>
<td>If checking “Ceremonial Role” or “Other” describe below:</td>
<td></td>
<td></td>
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Sandra Cruz, Ticket Administrator 4/4/18

Signature of Agency Head or Designee
Print Name
Title

Comment:

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