**Agency Name**
County of Los Angeles

**Division, Department, or Region (if applicable)**
First District, Board of Supervisors

**Designated Agency Contact (Name, Title)**
Megan Moret, Ticket Administrator

**Area Code/Phone Number**
213.974.4111

**E-mail**
mmoret@bos.lacounty.gov

**Face Value of Each Ticket/Pas**
$45

**Date(s)**
3/29/18

---

**Function or Event Information**

- **Does the agency have a ticket policy?** Yes [x] No [ ]
- **Event Description:** Dodgers
- **Ticket(s)/Pass(es) provided by agency?** Yes [ ] No [x]
- **Was ticket distribution made at the behest of agency official?** Yes [ ] No [x]

---

**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

<table>
<thead>
<tr>
<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>Staff</td>
<td>2</td>
</tr>
<tr>
<td>Per ticket policy 5.3 (k)</td>
<td></td>
</tr>
</tbody>
</table>

---

### B. Name of Individual (Last, First)

<table>
<thead>
<tr>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Ceremonial Role [ ] Other [ ] Income [ ]</td>
</tr>
</tbody>
</table>

If checking "Ceremonial Role" or "Other" describe below:

---

### C. Name of Outside Organization (include address and description)

<table>
<thead>
<tr>
<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>
<td></td>
</tr>
</tbody>
</table>

---

**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.

Signature of Agency Head or Designee: [Signature]

Megan Moret, Ticket Administrator

Print Name: [Megan Moret]

Title: [Ticket Administrator]

Date: 5/11/18 (month, day, year)

Comment: [Blank]

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
County of Los Angeles
Division, Department, or Region (if applicable)
First District, Board of Supervisors
Designated Agency Contact (Name, Title)
Megan Moret, Ticket Administrator
Area Code/Phone Number 213.974.4111
E-mail mmoret@bos.lacounty.gov

Date Stamp

2. Function or Event Information
Does the agency have a ticket policy? Yes ☒ No □ Face Value of Each Ticket/Pass $ 45
Event Description: Dodgers
Date(s) 3 / 30 / 18
Ticket(s)/Pass(es) provided by agency? Yes □ No ☒ If no: Dodgers
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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
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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.

Signature of Agency Head or Designee: [Signature]
Megan Moret: Print Name
Ticket Administrator: [Title]
5/11/18 (month, day, year)

Comment: ____________________________
Agency Name: County of Los Angeles
Division, Department, or Region (if applicable): First District, Board of Supervisors
Designated Agency Contact (Name, Title): Megan Moret, Ticket Administrator
Area Code/Phone Number: 213.974.4111
Email: mmoret@bos.lacounty.gov

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass $45
Event Description: Dodgers
Date(s): 3/31/18
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: Dodgers
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.

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<tr>
<th>A.</th>
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4. Verification

I have read and understand FPPC Regulations 18044.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Signature of Agency Head or Designee: Megan Moret
Print Name: Ticket Administrator
Title: 5/11/18 (month, day, year)

Comment: 

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. **Agency Name**
   - County of Los Angeles
   - Division, Department, or Region (if applicable): First District, Board of Supervisors
   - Designated Agency Contact (Name, Title): Megan Moret, Ticket Administrator
   - Area Code/Phone Number: 213.974.4111
   - E-mail: mmoret@bos.lacounty.gov

2. **Function or Event Information**
   - Does the agency have a ticket policy? Yes ☒ No ☐
   - Face Value of Each Ticket/Pass: $45
   - Event Description: Dodgers
   - Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   - Event Date(s): 4/1/18
   - Was ticket distribution made at the behest of agency official? Yes ☐ No ☒

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.

<table>
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<tr>
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<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
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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.
   - Signature of Agency Head or Designee: [Signature]
   - Print Name: Megan Moret
   - Title: Ticket Administrator
   - Date (month, day, year): 5/11/18

Comment: ____________________________

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
County of Los Angeles

Division, Department, or Region (if applicable)
First District, Board of Supervisors

Designated Agency Contact (Name, Title)
Megan Moret, Ticket Administrator

Area Code/Phone Number 213.974.4111
E-mail mmoret@bos.lacounty.gov

Date Stamp
California Form 802
For Official Use Only

Amendment (Must Provide Explanation in Part 3.)

Date of Original Filing: (month, day, year)

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐

Face Value of Each Ticket/Pass $45

Event Description: Dodgers

Date(s) 4/10/18

Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒

Was ticket distribution made at the behest of agency official? Yes ☐ No ☒

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.

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Ceremonial Role ☐ Other ☐ Income ☐

If checking “Ceremonial Role” or “Other” describe below:

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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.

Signature of Agency Head or Designee
Megan Moret
Ticket Administrator

Print Name
Title

Verification Date: 5/11/18 (month, day, year)

Comment: __________________________________________

FPPC Form 802 (2/2016)
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Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   First District, Board of Supervisors
   Designated Agency Contact (Name, Title)
   Megan Moret, Ticket Administrator
   Area Code/Phone Number 213.974.4111
   E-mail mmoret@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $45
   Event Description: Dodgers
   Date(s) 4/11/18
   Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐
   If no: Dodgers
   Was ticket distribution made at the behest of agency official? Yes ☒ No ☐

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.

<table>
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<th>A. Name of Agency, Department or Unit</th>
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<td></td>
<td>If checking 'Ceremonial Role' or 'Other' describe below:</td>
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</tbody>
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<table>
<thead>
<tr>
<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
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</table>

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.

   Signature of Agency/Head or Designee ___________________________

   Megan Moret
   Print Name
   Title
   Ticket Administrator
   5/11/18
   (month, day, year)

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

1. **Agency Name**
   County of Los Angeles
   Division, Department, or Region (if applicable)
   First District, Board of Supervisors
   Designated Agency Contact (Name, Title)
   Megan Moret, Ticket Administrator

2. **Function or Event Information**
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $45
   Event Description: Dodgers
   Date(s) 4/13/18
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   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**
   Staff 2 Per ticket policy 5.3 (k)

   **B. Name of Individual (Last, First)**
   **Number of Ticket(s)/Passes**
   **Identify one of the following:**
   Ceremonial Role ☐ Other ☐ Income ☐
   Ceremonial Role ☐ Other ☐ Income ☐

   **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.

   Megan Moret
   Signature: ___________________ Print Name: ___________________ Title: Ticket Administrator
   5/11/18 (month, day, year)

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

1. Agency Name
   County of Los Angeles
   Division, Department, or Region (if applicable)
   First District, Board of Supervisors
   Designated Agency Contact (Name, Title)
   Megan Moret, Ticket Administrator

Area Code/Phone Number
   213.974.4111
E-mail
   mmoret@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy?  Yes ☐  No ☑
   Face Value of Each Ticket/Pass $ 45
   Event Description: Dodgers
   Date(s) 4/14/18
   Ticket(s)/Pass(es) provided by agency?  Yes ☐  No ☑
   If no: 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.

<table>
<thead>
<tr>
<th>A. Name of Agency, Department or Unit</th>
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<tr>
<td>Staff</td>
<td>2</td>
<td>Per ticket policy 5.3 (k)</td>
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<tr>
<th>B. Name of Individual (Last, First)</th>
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<td></td>
<td>Ceremonial Role ☐  Other ☐</td>
</tr>
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</tr>
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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.

Signature of Agency Head or Designee: [Signature]
Megan Moret
Ticket Administrator
Print Name
Title
5/11/18 (month, day, year)

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

1. Agency Name
   County of Los Angeles
   First District, Board of Supervisors
   Megan Moret, Ticket Administrator

   Area Code/Phone Number E-mail
   213.974.4111 mmoret@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Event Description: Dodgers
   Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐
   Was ticket distribution made at the behest of agency official? Yes ☒ No ☐

   Face Value of Each Ticket/Pass $ 45
   Date(s) 4 / 15 / 18
   Name of Source
   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
   Staff 2 Per ticket policy 5.3 (k)

   B. Name of Individual (Last, First) Number of Ticket(s)/Passes Identify one of the following:
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   Signature of Agency Head or Designee: ___________________________
   Megan Moret
   Ticket Administrator
   Print Name
   Title
   Date 5/11/18

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

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   Event Description: Dodgers
   Date(s) 4/20/18
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ Name of Source
   If no: Dodgers
   If yes: Official’s Name (Last, First)

3. Recipients
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   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.

   Signature of Agency Head or Designee: [Signature]
   Megan Moret
   Ticket Administrator
   Print Name
   Title
   5/11/18
   (month, day, year)

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

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   County of Los Angeles
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2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $ 45
   Event Description: Dodgers
   Date(s) 4 / 21 / 18
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   Name of Source
   Was ticket distribution made at the behest of agency official? Yes ☐ No ☒
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<th>C. Name of Outside Organization</th>
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4. Verification
   I have read and understand FPPC Regulations 18944.1 and 19942. I have verified that the distribution set forth above, is in accordance with the requirements.

   Signature of Agency Head or Designee
   Megan Moret
   Print Name
   Title
   5/11/18
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
County of Los Angeles
Division, Department, or Region (if applicable)
First District, Board of Supervisors
Designated Agency Contact (Name, Title)
Megan Moret, Ticket Administrator
Area Code/Phone Number 213.974.4111
E-mail mmoret@bos.lacounty.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☒ No ☐
Face Value of Each Ticket/Pass $45
Event Description: Dodgers
Date(s) 4/22/18
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
If no: 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.

<table>
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<tr>
<th>A. Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Passes</th>
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<tbody>
<tr>
<td>Staff</td>
<td>2</td>
<td>Per ticket policy 5.3 (k)</td>
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<tr>
<th>B. Name of Individual (Last, First)</th>
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Signature of Agency Head or Designee: Megan Moret
Print Name: Ticket Administrator
Title: 5/11/18
(month, day, year)

Comment:
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)
   First District, Board of Supervisors
   Designated Agency Contact (Name, Title)
   Megan Moret, Ticket Administrator
   Area Code/Phone Number
   213.974.4111
   E-mail
   mmoret@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Event Description: Dodgers
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   Face Value of Each Ticket/Pass $ 45
   Date(s) 4 / 23 / 18
   Was ticket distribution made at the behest of agency official? Yes ☐ No ☒

3. Recipients
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   Print Name
   Title
   5/11/18 (month, day, year)
   Comment:

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

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County of Los Angeles
Division, Department, or Region (if applicable)
First District, Board of Supervisors
Designated Agency Contact (Name, Title)
Megan Moret, Ticket Administrator
Area Code/Phone Number 213.974.4111
E-mail mmoret@bos.lacounty.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☒ No ☐
Face Value of Each Ticket/Pass $ 45
Event Description: Dodgers
Date(s) 4 / 24 / 18
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
If no: Dodgers
Was ticket distribution made at the behest of agency official? Yes ☒ No ☐
Name of Source
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.

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5/11/18 (month, day, year)

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Designated Agency Contact (Name, Title)
Megan Moret, Ticket Administrator

Area Code/Phone Number  E-mail
213.974.4111 mmoret@bos.lacounty.gov

2. Function or Event Information
Does the agency have a ticket policy?  Yes ☒ No ☐

Event Description: Dodgers

Face Value of Each Ticket/Pass $45

Date(s)  4/25/18

Ticket(s)/Pass(es) provided by agency?  Yes ☐ No ☒

If no: Dodgers

Was ticket distribution made at the behest of agency official?  Yes ☐ No ☒

If yes: ____________________________

Name of Source ____________________________

Official's Name (Last, First) ____________________________

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