

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

**A Public Document**

|  |                         |  |  |
|--|-------------------------|--|--|
| <b>1. Agency Name</b>                                  |                         | Date Stamp   | <b>California Form 802</b><br><small>For Official Use Only</small> |
| County of Los Angeles                                  |                         |  |  |
| Division, Department, or Region <i>(if applicable)</i> |                         |  |  |
| First District, Board of Supervisors                   |                         |  |  |
| Designated Agency Contact <i>(Name, Title)</i>         |                         | <input type="checkbox"/> Amendment <i>(Must Provide Explanation in Part 3.)</i><br><br>Date of Original Filing: _____<br><small>(month, day, year)</small> |  |
| 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     Face Value of Each Ticket/Pass \$ 150

Event Description: Dorothy Chandler Pavillion    Date(s) 4 / 12 / 18  
Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency?    Yes     No     If no: Dorothy Chandler Pavillion  
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   | 4                           | Per ticket policy 5.3 (k)  |
|   |                             |  |
| B. Name of Individual (Last, First)                               | Number of Ticket(s)/ Passes | Identify one of the following:   |
|   |                             | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/><br><small>If checking "Ceremonial Role" or "Other" describe below:</small> |
|   |                             | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/><br><small>If checking "Ceremonial Role" or "Other" describe below:</small> |
| 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.*

|   |  |  |  |
|---|--|--|--|
| <br><small>Signature of Agency Head or Designee</small> | Megan Moret<br><small>Print Name</small> | Ticket Administrator<br><small>Title</small> | 5/11/18<br><small>(month, day, year)</small> |
|---|--|--|--|

Comment: \_\_\_\_\_