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

#### 1. Agency Name
- Los Angeles County
- Division, Department, or Region (if applicable): Board of Supervisors, Fourth District
- Designated Agency Contact (Name, Title): Nancy Herrera
- Area Code/Phone Number: (213) 974-4444
- E-mail: nherrera@bos.lacounty.gov

#### 2. Function or Event Information
- Does the agency have a ticket policy? Yes □ No □
- Face Value of Each Ticket/Pass $168, $99
- Event Description: LA Philharmonic
- Date(s): 12/03/17
- Ticket(s)/Pass(es) provided by agency? Yes □ No □
- If no: Walt Disney Concert Hall
- Name of Source: Official’s Name (Last, First)
- 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>
<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>
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<tr>
<td>Board of Supervisors</td>
<td>6</td>
<td>Ticket Policy Sec 5.3(k)</td>
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</tbody>
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<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
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<tbody>
<tr>
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<td>Ceremonial Role □ Other □ Income □</td>
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<th>C. Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Passes</th>
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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: Nancy Herrera
- Print Name: Nancy Herrera
- Ticket Administrator: 01/05/18 (month, day, year)
- Comment: Four Orchestra & Two Terrace

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 855/ASK-FPPC (855/275-3772)
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Los Angeles County
Division, Department, or Region (if applicable)
Board of Supervisors, Fourth District
Designated Agency Contact (Name, Title)
Nancy Herrera
Area Code/Phone Number E-mail
(213) 974-4444 nherrera@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 $ 168
Event Description: LA Philharmonic
Provide Title/Explanation
Date(s) 12 / 08 / 17
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: Walt Disney Concert Hall
If yes: Walt Disney Concert Hall
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.

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

  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.

Nancy Herrera
Signature of Agency Head or Designee
Print Name
Ticket Administrator
Title
01/05/18 (month, day, year)

Comment: 

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Los Angeles County
Division, Department, or Region (if applicable)
Board of Supervisors, Fourth District
Designated Agency Contact (Name, Title)
Nancy Herrera
Area Code/Phone Number
(213) 974-4444
E-mail
nherrera@bos.lacounty.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes [x] No [□]
Face Value of Each Ticket/Pass $ 99
Event Description: LA Philharmonic
Provide Title/Explanation
Date(s) 12/15/17
If no: Walt Disney Concert Hall
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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Signature of Agency Head or Designee
Nancy Herrera
Ticket Administrator
01/05/18 (month, day, year)
Comment: ____________________________
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   Los Angeles County
   Division, Department, or Region (if applicable)
   Board of Supervisors, Fourth District

   Designated Agency Contact (Name, Title)
   Nancy Herrera

   Area Code/Phone Number
   (213) 974-4444

   E-mail
   nherrera@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $168
   Event Description: LA Philharmonic
   Date(s) 12/16/17
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   If no: Walt Disney Concert Hall
   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.

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   Nancy Herrera
   Signature of Agency/Head of Designee

   Ticket Administrator
   Print Name
   Title
   01/05/18
   (month, day, year)

   Comment: ____________________________________________________________
Agency Name
Los Angeles County
Division, Department, or Region (if applicable)
Board of Supervisors, Fourth District
Designated Agency Contact (Name, Title)
Nancy Herrera
Area Code/Phone Number (213) 974-4444
E-mail nherrera@bos.lacounty.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☑ No ☐
Face Value of Each Ticket/Pass $ 99
Event Description: LA Philharmonic
Provide Title/Explanation
Date(s) 12 / 17 / 17
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
If no: Walt Disney Concert Hall
Name of Source
Was ticket distribution made at the behest of agency official? Yes ☐ No ☑
If yes: 
Official’s Name (Last, First)

3. Recipients
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Nancy Herrera
Signature of Agency Head or Designee

Ticket Administrator
Print Name
01/05/18 (month, day, year)

Comment: ________________________________

FPPC Form 802 (2/2016)
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Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
Los Angeles County
Division, Department, or Region (if applicable)
Board of Supervisors, Fourth District
Designated Agency Contact (Name, Title)
Nancy Herrera
Area Code/Phone Number E-mail
(213) 974-4444 nherrera@bos.lacounty.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes ☒ No ☐
Face Value of Each Ticket/Pass $168
Event Description: LA Philharmonic
Provide Title/Explanations
Date(s) 12/19/17
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
If no: Walt Disney Concert Hall
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.
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[Signature of Agency Head or Designee]
Nancy Herrera
Ticket Administrator 01/05/18
(month, day, year)

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

1. Agency Name
   Los Angeles County
   Board of Supervisors, Fourth District
   Nancy Herrera
   (213) 974-4444
   nherrera@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass: $168
   Event Description: LA Philharmonic
   Date(s): 12/20/17
   Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐
   If no: Walt Disney Concert Hall
   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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   Signature of Agency Head or Designee: Nancy Herrera
   Print Name: Nancy Herrera
   Title: Ticket Administrator
   Date: 01/05/18
   (Month, day, year)

   Comment: ____________________________
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Board of Supervisors, Fourth District
Designated Agency Contact (Name, Title)
Nancy Herrera
Area Code/Phone Number E-mail
(213) 974-4444 nherrera@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass $ 168
   Event Description: LA Philharmonic
   Date(s) 12 / 22 / 17
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: Walt Disney Concert Hall
   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.

   A. Name of Agency, Department or Unit | Number of Ticket(s)/Passes | Describe the public purpose made pursuant to the agency’s policy
   Board of Supervisors 2 Ticket Policy Sec 5.3(k)

   B. Name of Individual (Last, First) | Number of Ticket(s)/Passes | Identify one of the following:

   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.

Nancy Herrera
Signature of Agency Head or Designee
Ticket Administrator
Print Name
Title
01/05/18
(month, day, year)

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   Nancy Herrera
   Area Code/Phone Number  E-mail
   (213) 974-4444          nherrera@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $ 99
   Event Description: LA Philharmonic
   Date(s) 12 / 23 / 17
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   If no: Walt Disney Concert Hall
   Name of Source
   Was ticket distribution made at the behest of agency official? Yes ☐ No ☒
   If yes: Official's Name (Last, First)

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

| C. Name of Outside Organization      | Number of Ticket(s)/Passes | Describe the public purpose made pursuant to the agency's policy |
| include address and description      |                             |                                                               |

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:
   Nancy Herrera  Print Name
   Ticket Administrator  Title
   01/05/18  (month, day, year)

   Comments: 4-Tickets for the 3:00 pm performance & 4-tickets for the 8:00 pm performance

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2. Function or Event Information
   Does the agency have a ticket policy? Yes ☒ No ☐
   Face Value of Each Ticket/Pass $168, $99
   Event Description: LA Philharmonic
   Date(s) 12/31/17
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒
   If no: Walt Disney Concert Hall
   Name of Source: Official's Name (Last, First)
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   Board of Supervisors 4 Ticket Policy Sec 5.3(k)

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   Signature of Agency Head or Designee Nancy Herrera
   Print Name
   Ticket Administrator
   Title
   Date 01/05/18
   (month, day, year)

Comment:

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