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

1. Agency Name
   County of Los Angeles
   Board of Supervisors, First District
   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) 7 / 1 / 18 __/__/____
   If no: Dodgers
   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.

<table>
<thead>
<tr>
<th>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>staff</td>
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<td>Per Ticket Policy 5.3 (k)</td>
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</table>

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<tr>
<th>Name of Individual (Last, First)</th>
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<th>Identify one of the following:</th>
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<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐</td>
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<tr>
<td></td>
<td></td>
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<th>Name of Outside Organization (include address and description)</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]
Print Name: Megan Moret
Title: Ticket Administrator
Date: 8/8/18

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

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Area Code/Phone Number  
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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) 7/2/18

Ticket(s)/Pass(es) provided by agency?  
Yes ☐ No ☑  
If no: Dodgers  
Name of Source  
If yes:  
Official’s Name (Last, First)

3. Recipients  
* Use Section A to identify the agency’s department or unit.  
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A. Name of Agency, Department or Unit  
Number of Ticket(s)/Passes  
Describe the public purpose made pursuant to the agency’s policy

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C. Name of Outside Organization (include address and description)  
Number of Ticket(s)/Passes  
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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  
Print Name  
Ticket Administrator  
Title  
8/8/18  
(month, day, year)

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

1. Agency Name
County of Los Angeles
Division, Department, or Region (if applicable)
Board of Supervisors, First District
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 ☑
Date(s) 7 / 3 / 18
Was ticket distribution made at the behest of agency official?
Yes ☐ No ☑
If no: Dodgers
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: Megan Moret
Print Name: Megan Moret
Title: Ticket Administrator
Date: 8/8/18 (month, day, year)

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

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

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) 7/4/18
   If no: Dodgers
   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.
   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 □
   | 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

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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.

   Megan Moret
   Print Name
   Ticket Administrator
   Title
   8/8/18 (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)
Board of Supervisors, First District
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 ☐
Was ticket distribution made at the behest of agency official? Yes ☐ No ☒
Face Value of Each Ticket/Pass $45
Date(s) 7/13/18
If no: Dodgers
Name of Source
If yes: Official’s Name (Last, First)

3. Recipients
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Signature of Agency Head or Designee: Megan Moret
Print Name: Ticket Administrator
Title: 8/8/18
(month, day, year)
Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name  
County of Los Angeles  
Division, Department, or Region (If applicable)  
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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 □

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):  
7 / 14 / 18

If 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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Signature of Agency Head or Designee  
Megan Moret  
Print Name  
Ticket Administrator  
Title  
6/8/18  
(month, day, year)

Comment:

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FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
Agency Name
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Board of Supervisors, First District
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) 7 / 15 / 18
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
If no: Dodgers
Name of Source
If yes: Name of Source (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.

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Signature of Agency Head of Designee
Megan Moret
Print Name
Ticket Administrator
Title
Date 8/8/18 (month, day, year)

Comment:

FPPC Form 802 (2/2016)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)
1. **Agency Name**  
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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 [ ]

- **Was ticket distribution made at the behest of agency official?**  
  Yes [ ]  No [ ]

- **Face Value of Each Ticket/Pass:** $45

- **Date(s):** 7/30/18

- **If no:** Dodgers  
  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.

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|    |                                  |                             | **Ceremonial Role** [ ]  
|    |                                  |                             | **Other** [ ]  
|    |                                  |                             | **Income** [ ]               |

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Signature of Agency Head or Designee: 
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Ticket Administrator
Title
8/8/18
(month, day, year)

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

A Public Document

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   Board of Supervisors, First District
   Megan Moret, Ticket Administrator

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

Date Stamp
California Form 802
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Amendment (Must Provide Explanation in Part 3)
Date of Original Filing: (month, day, year)

2. Function or Event Information
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   Event Description: Dodgers
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   Was ticket distribution made at the behest of agency official? Yes ☐ No ☒
   Face Value of Each Ticket/Pass $ 45
   Date(s) 7 / 31 / 18
   If no: Dodgers
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   If yes: Official's Name (Last, First)

3. Recipients
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Signature of Agency Head or Designee: Megan Moret
Print Name: Ticket Administrator
Title: 8/8/18
(month, day, year)

Comment: 

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