**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**
herrera@bos.lacounty.gov

---

**2. Function or Event Information**

Does the agency have a ticket policy? Yes [ ] No [x]

**Face Value of Each Ticket/Pass** $165

**Event Description:** LA Philharmonic

**Date(s):** 12/1/18

**Ticket(s)/Pass(es) provided by agency?** Yes [x] No [ ]

If no: Walt Disney Concert Hall

**Name of Source**

**Was ticket distribution made at the behest of agency official?** Yes [x] 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**

<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>
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<tr>
<td>Board of Supervisors</td>
<td>2</td>
<td>Ticket Policy Sec 5.3(k)</td>
</tr>
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</table>

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

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</tr>
<tr>
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<td>Income [ ]</td>
</tr>
</tbody>
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If checking "Ceremonial Role" or "Other" describe below:

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

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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**
Nancy Herrera

**Print Name**

**Ticket Administrator**

**Title**

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
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 $ 185

Event Description: LA Philharmonic

Provide Title/Explanation

Date(s) 12 / 19 / 18

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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<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.

Nancy Herrera

Signature of Agency Head or Designee

Ticket Administrator

Print Name

Title

1/15/19

(mo nth, da y, ye ar)

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
   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 $165
   Event Description: LA Philharmonic
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   Date(s) 12 / 20 / 18
   If no: Walt Disney Concert Hall
   Name of Source
   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 or Designee
   Nancy Herrera  Print Name
   Ticket Administrator  Title  1/15/19

   (month, day, year)

Comment: ____________________________

FPPC Form 802 (2/2016)
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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

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 $ 165

Event Description: LA Philharmonic

Provide Title/Explanation

Date(s) 12 / 21 / 18

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.

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

4 Ticket Policy Sec 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:

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

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          Print Name          Title
Nancy Herrera          Ticket Administrator

1/15/19 (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 [x]  No [☐]  
Face Value of Each Ticket/Pass $ 99
Event Description: LA Philharmonic
Ticket(s)/Pass(es) provided by agency?  Yes [☐]  No [x]
Date(s)  12 / 22 / 18
Was ticket distribution made at the behest of agency official?  Yes [☐]  No [x]

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  
Ticket Administrator
Title  
1/15/19
(month, day, year)

Comment: __________________________________________

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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 $ 165  
Event Description: LA Philharmonic  
Provide Title/Explanation  
Ticket(s)/Pass(es) provided by agency?  Yes ☐  No ☒  
Date(s)  12 / 31 / 18  
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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