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

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

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 $ ___________ 27.00
   Event Description: Toyota Symphony for the Youth
   Date(s) 02 / 12 / 22 ___________ ___________
   Ticket(s)/Pass(es) provided by agency? Yes □ No □
   If no: LA Philharmonic/Walt Disney Concert Hall
   Name of Source
   Was ticket distribution made at the behest of agency official? Yes □ No □
   If yes: __________________________________________

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

<table>
<thead>
<tr>
<th>B. Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role □ Other □ Income □</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role □ Other □ Income □</td>
</tr>
</tbody>
</table>

<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>
</thead>
</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.

Nancy Herrera
Signature of Agency Head or Designee
Print Name
Ticket Administrator
Title
03/02/2022 (month, day, year)

Comment: __________________________________________