Agency Report of:

Ceremonial Role Events and Ticket/Pass Distributions A Public Document Date Stamp

Los Angeles County				- 510 5 (611)	Form 802	
Division, Department, or Re	gion (if applicable)		For Official Use Only			
Fourth District, Board of Si	77 N.					
Designated Agency Contact						
Nancy Herrera, Ticket Adn	ninistrator	Amendment (Must Pro	ovide Explanation in Part 3.)			
Area Code/Phone Number	E-mail			Amendment (Wast Fit	Svide Explanation in Fait 3.)	
(213) 974-4444	nherrera@bos.lacounty.gov			Date of Original Filing:(month, day, year)		
2. Function or Event Info	rmation					
			Face Value of	of Each Ticket/Pass \$\$63 - \$42		
Event Description: Focus	on Andrienssen		Date(s)04	, 09 , 22		
	Provide Title/Expla	anation		narmonic/Walt Disney (Concert Hall	
Ticket(s)/Pass(es) provided	by agency? Yes	□ No ■ I	ir no:	Name of Source	- Consolit Hall	
Was ticket distribution mad	e at the behest Yes	□ No 🔳 I	If yes:	Official's Name (Last, First)		
of agency official?				g in the least and all the find gains and the least of the the least of the least		
3. Recipients						
Use Section A to identify the age	ncy's department or unit. •	Use Section B to	identify an individu	al. Use Section C to identify	an outside organization.	
A. Name of Agency, Dep	artment or Unit	Number of Ticket(s)/ Passes	Describe the	e public purpose made pursu	uant to the agency's policy	
Board of Supervisors		4	Pursuant to Ticket Policy Sec 5.3(k)			
B. Name of Ind		Number of Ticket(s)/ Passes		Identify one of the fol	lowing:	
			1	onial Role Other Onial Role Other Other Other Other Other Other Other Other	Income In	
			1	onial Role Other on "Other" description of "Ceremonial Role" or "Other" descriptions of the control of the cont	Income Income	
C. Name of Outside O (include address and		Number of Ticket(s)/ Passes	Describe the	public purpose made pursu	ant to the agency's policy	
 Verification I have read and understand FF 	PC Regulations 18944.	.1 and 18942. I	I have verified th	at the distribution set fort	h above, is in accordance	
with the requirements.	W 7					
Signature of Agency Head or Designee Print Name			Ticket	Administrator	05/3/2022	
Signature of Agency Head of Design	ee Pr	iiit ivarne		Title	(month, day, year)	
Comment:					=	

Print

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California Los Angeles County Form Division, Department, or Region (if applicable) For Official Use Only Fourth District, Board of Supervisors Designated Agency Contact (Name, Title) Nancy Herrera, Ticket Administrator Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail (213) 974-4444 nherrera@bos.lacounty.gov Date of Original Filing: -(month, day, year) 2. Function or Event Information \$144 - \$102 Does the agency have a ticket policy? Face Value of Each Ticket/Pass \$ _ Yes No 🗆 Event Description: Jeff Goldblm Date(s) ____/ Provide Title/Explanation If no: LA Philharmonic/Walt Disney Concert Hall Ticket(s)/Pass(es) provided by agency? Yes No 🔳 Name of Source Was ticket distribution made at the behest Yes ☐ No ■ If yes: _ Official's Name (Last, First) of agency official? 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. Number A. Name of Agency, Department or Unit Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ **Passes** 4 Board of Supervisors Pursuant to Ticket Policy Sec 5.3(k) Number B. Name of Individual Identify one of the following: of Ticket(s)/ (Last, First) **Passes** Ceremonial Role Other Income ___ If checking "Ceremonial Role" or "Other" describe below: Ceremonial Role Other ___ Income If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization C. Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ (include address and description) **Passes**

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vermeation			
I have read and understand FPPC Regulat	ions 18944.1 and 18942. I	have verified that the distribution set for	th above, is in accordance
with the requirements,			
narry Herrer Na	ncy Herrera	Ticket Administrator	05/3/2022
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)
U			
Comment:			pr