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
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 $ $168 & 99
Event Description: LA Philharmonic Performance
Provide Title/Explanation
Date(s) 01/19/17
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. * 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>4</td>
<td>Ticket Policy Sec 5.3 (k)</td>
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<tr>
<th>B. Name of Individual (Last, First)</th>
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<th>Identify one of the following:</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: _____________________________
Nancy Herrera
Print Name: _____________________________
Ticket Administrator: _____________________________
Title: _____________________________
Date: 3/17/17 (month, day, year)

Comment: 2 Orchestra Tickets and 2 Terrace
Agency Report of:  
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Board of Supervisors
   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: $168
   Event Description: LA Philharmonic Performance
   Date(s): 01 / 26 / 17
   Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐ If no: Walt Disney Concert Hall
   Name of Source: 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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   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: 3/17/17 (month, day, year)
   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
   County of Los Angeles
   Board of Supervisors
   Nancy Herrera, Ticket Administrator

2. Function or Event Information
   \( \text{Face Value of Each Ticket/Pass } $99 \)
   \( \text{Event Description: LA Philharmonic Performance} \)
   \( \text{Date(s) } 01/27/17 \)
   \( \text{Ticket(s)/Pass(es) provided by agency? Yes} \)
   \( \text{Was ticket distribution made at the behest of agency official? Yes} \)

3. Recipients
   \( \text{A. Name of Agency, Department or Unit} \)
   \( \text{Number of Ticket(s)/Passes} \)
   \( \text{Describe the public purpose made pursuant to the agency's policy} \)
   \( \text{Board of Supervisors} \)
   \( 2 \)
   \( \text{Ticket Policy Sec 5.3 (k)} \)

   \( \text{B. Name of Individual} \)
   \( \text{(Last, First)} \)
   \( \text{Number of Ticket(s)/Passes} \)
   \( \text{Identify one of the following:} \)
   \( \text{Ceremonial Role} \)
   \( \text{Other} \)
   \( \text{Income} \)

   \( \text{C. Name of Outside Organization} \)
   \( \text{(include address and description)} \)
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4. Verification
   \( \text{I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.} \)
   \( \text{Signature of Agency Head or Designee: Nancy Herrera} \)
   \( \text{Print Name: Ticket Administrator} \)
   \( \text{Title: } 3/17/17 \)

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

1. Agency Name
   County of Los Angeles
   Board of Supervisors
   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 $ 168 & 99
   Event Description: LA Philharmonic Performance
   Date(s) 01 / 29 / 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 ☒

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
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      Board of Supervisors 4 Ticket Policy Sec 5.3 (k)

   B. Name of Individual (Last, First)
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   C. Name of Outside Organization (include address and description)
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      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 Nancy Herrera Ticket Administrator
   Print Name Title 3/17/17
   (month, day, year)

   Comment: 2 Orchestra & 2 Terrace Tickets
Agency Report of:
Ceremonial Role Events and Ticket/Pass Distributions

1. Agency Name
   County of Los Angeles
   Board of Supervisors
   Nancy Herrera, Ticket Administrator

   Area Code/Phone Number (213) 974-4444
   E-mail 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 Performance
   Date(s) 01 / 31 / 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)]

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   Ticket Administrator
   3/17/17 (month, day, year)
   Comment: ____________________________

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   FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)