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/E-mail: 2139.974.4111 / 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)

Function or Event Information
Does the agency have a ticket policy? Yes ☑ No ☐
Event Description: Dodgers Tickets
Provide Title/Explanation:
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
If no: Los Angeles Dodgers
Name of Sponsor:
If yes: Official’s Name (Last, First)

Face Value of Each Ticket/Pass: $40
Date(s): 4/4/15

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)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board of Supervisors Staff</td>
<td>2</td>
<td>Per ticket policy 5.3 (k)</td>
</tr>
</tbody>
</table>

Verification
I have read and understood FPPC Regulation 16944.1 and 16944.2. I have verified that the distribution set forth above is in accordance with the requirements.
Megan Moret
Ticket Administrator
4/20/15
Print Name:
Title:
(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 E-mail
   2139.974.4111 mmoret@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐
   Event Description: Dodgers Tickets
   Face Value of Each Ticket/Pass $40
   Date(s) 4 6 15
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑
   If no: Los Angeles Dodgers
   Name of Source
   Was ticket distribution made at the behest of agency official? No ☑ Yes ☐
   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)/Pass(es) Describe the public purpose made pursuant to the agency's policy
      Board of Supervisors Staff 2 Per ticket policy 5.3 (k)

   B. Name of Individual (Last, First) Number of Ticket(s)/Pass(es) 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)/Pass(es) 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.
   Megan Moret Ticket Administrator 4/20/15
   Printed Name Title (Month, Day, Year)
   Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
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 E-mail  
   2139.974.4111 mmoret@bos.lacounty.gov  

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☑ No ☐  
   Face Value of Each Ticket/Pass $40  
   Event Description Dodgers Tickets  
   Date(s) 4 7 15  
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑  
   If yes: Los Angeles Dodgers  
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☑  
   If yes: Los Angeles Dodgers  
   Was ticket distribution made at the behest of agency official? No ☑ Yes ☐  
   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)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency’s policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board of Supervisors Staff</td>
<td>2</td>
<td>Per ticket policy 5.3 (k)</td>
</tr>
</tbody>
</table>

| Name of Individual (Last, First) | Number of Ticket(s)/Pass(es) | Identify one of the following:  
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role ☐ Other ☐ Income ☐</td>
</tr>
</tbody>
</table>
|                                 |                               | If checking “Ceremonial Role” or “Other” describe below:  
|                                 |                               | Ceremonial Role ☐ Other ☐ Income ☐ |
|                                 |                               | If checking “Ceremonial Role” or “Other” describe below:  
|                                 |                               | Ceremonial Role ☐ Other ☐ Income ☐ |

4. Verification
   I have read and understand FPPC Regulations 19344.1 and 19342. 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 (Month, Day, Year): 4/20/15  

Comment:  

FPPC Form 802 (4/12)  
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
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 E-mail
   2139.974.4111 mmoret@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes[ ] No[X]
   Face Value of Each Ticket/Pass $40
   Event Description Dodgers Tickets
   Date(s) 4 8 15
   Ticket(s)/Pass(es) provided by agency? Yes[ ] No[X]
   If no: Los Angeles 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)/Pass(es) Describe the public purpose made pursuant to the agency's policy
      Board of Supervisors Staff 2 Per ticket policy 5.3 (k)

   B. Name of Individual (Last, First) Number of Ticket(s)/Pass(es) 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)/Pass(es) Describe the public purpose made pursuant to the agency's policy

4. Verification
   I have read and understand FPPC Regulations 19444.1 and 19442. I have verified that the distribution set forth above, is in accordance with the requirements.
   Megan Moret [Signature]
   Title Ticket Administrator
   Date (Month, Day, Year) 4/20/15
   FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
**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**
2139.974.4111

**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**

**2. Function or Event Information**

<table>
<thead>
<tr>
<th>Does the agency have a ticket policy?</th>
<th>Yes [x]</th>
<th>No [ ]</th>
<th>Face Value of Each Ticket/Pass $</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Event Description</th>
<th>Dodgers Tickets</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Date(s)</th>
<th>4</th>
<th>14</th>
<th>15</th>
</tr>
</thead>
</table>

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

If no: Los Angeles Dodgers

If yes: Name of Source

| Was ticket distribution made at the behest of agency official? | No [x] | Yes [ ] |

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)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
</table>

Board of Supervisors Staff | 2 | Per ticket policy 5.3 (k) |

**B. Name of Individual**

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Identify one of the following:</th>
</tr>
</thead>
</table>

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

If checking “Ceremonial Role” or “Other” describe below:


<table>
<thead>
<tr>
<th>Ceremonial Role [ ]</th>
<th>Other [ ]</th>
<th>Income [ ]</th>
</tr>
</thead>
</table>

If checking “Ceremonial Role” or “Other” describe below:


**C. Name of Outside Organization**

<table>
<thead>
<tr>
<th>Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
</table>

**4. Verification**

I have read and understood FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above is in accordance with the requirements.

Megan Moret, Ticket Administrator

Print Name: Megan Moret

Title: Ticket Administrator

Date: 4/20/15

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
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: 2139.974.4111
   E-mail: mmoret@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes [X] No [ ]
   Face Value of Each Ticket/Pass: $ 40
   Event Description: Dodgers Tickets
   Date(s): 4/15
   Ticket(s)/Pass(es) provided by agency? Yes [ ] No [X]
   If no: Los Angeles Dodgers
   Name of Source
   Was ticket distribution made at the behest of agency official? No [X] 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)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board of Supervisors Staff</td>
<td>2</td>
<td>Per ticket policy 5.3 (k)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Individual (Last, First)</th>
<th>Number of Ticket(s)/Pass(es)</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>If checking &quot;Ceremonial Role&quot; or &quot;Other&quot; describe below:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Name of Outside Organization (include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</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 19441 and 19442. I have verified that the distribution set forth above, is in accordance with the requirements.
   Megan Moret [Signature]
   Ticket Administrator
   4/20/15
   (Month, Day, Year)
   Comment:

FPPC Form 802 (4/12)
FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-7772)
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 2139.974.4111
   E-mail mmoret@bos.lacounty.gov
   Date Stamp

2. Function or Event Information
   Does the agency have a ticket policy? Yes ✗ No ☐
   Face Value of Each Ticket/Pass $40
   Date(s) 4 17 15
   Event Description Dodgers Tickets
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐
   If no: Los Angeles Dodgers
   If yes: Official’s Name (Last, First)
   Ticket Issuance Date

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)/Pass(es)   Description of the public purpose made pursuant to the agency's policy
      Board of Supervisors Staff   2   Per ticket policy 5.3 (k)

   B. Name of Individual (Last, First)   Number of Ticket(s)/Pass(es)   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)/Pass(es)   Description of the public purpose made pursuant to the agency's policy
      Name of Outside Organization

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.
   Megan Moret  Ticket Administrator  4/20/15
   Signature of Agency Head or Designee
   Print Name
   Title
   Date (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 Tickets
- **Face Value of Each Ticket/Pass**: $40
- **Date(s)**: 4, 18, 15
- **Ticket(s)/Pass(es) provided by agency?**: **Yes** □ **No** □
- **Los Angeles Dodgers**

## 3. Recipients
- **Official's Name (Last, First)**

### A. Name of Agency, Department or Unit
<table>
<thead>
<tr>
<th>Name of Agency, Department or Unit</th>
<th>Number of Ticket(s)/Pass(es)</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>Board of Supervisors Staff</td>
<td>2</td>
<td>Per ticket policy 5.3 (k)</td>
</tr>
</tbody>
</table>

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

If checking “Ceremonial Role” or “Other” describe below:

### C. Name of Outside Organization
<table>
<thead>
<tr>
<th>Name of Outside Organization (Include address and description)</th>
<th>Number of Ticket(s)/Pass(es)</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.
- **Megan Moret**
- **Ticket Administrator**
- **Date (Month, Day, Year)**: 4/20/15

**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 [X] No [ ]
   - Event Description: Dodgers Tickets
   - Face Value of Each Ticket/Pass: $40
   - Date(s): 4/19/15
   - Ticket(s)/Pass(es) provided by agency? Yes [ ] No [X]
   - Was ticket distribution made at the behest of agency official? No [X] 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.

   A. Name of Agency, Department or Unit
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy
      Board of Supervisors Staff 2 Per ticket policy 5.3 (k)

   B. Name of Individual
      Number of Ticket(s)/Pass(es)
      Identify one of the following:
      Ceremonial Role [ ] Other [ ] Income [ ]
      If checking "Ceremonial Role" or "Other" describe below:

   C. Name of Outside Organization
      Number of Ticket(s)/Pass(es)
      Describe the public purpose made pursuant to the agency's policy

4. Verification
   I have read and understand FPPC Regulations 15944 & 15945. I have verified that the distribution set forth above, is in accordance with the requirements.
   Megan Moret, Ticket Administrator 4/20/15

Comment: