

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

A Public Document

<b>1. Agency Name</b> County of Los Angeles Division, Department, or Region (If Applicable) Chief Executive Officer Designated Agency Contact (Name, Title) Maria Duron, Ticket Administrator Area Code/Phone Number    E-mail 213-974-1101                      mduron@ceo.lacounty.gov	Date Stamp	<b>California Form 802</b> For Official Use Only
		<input type="checkbox"/> 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

Event Description Los Angeles County Fair  
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency?    Yes     No

Was ticket distribution made at the behest of agency official?    No     Yes

Face Value of Each Ticket/Pass \$ \_\_\_\_\_

Date(s) 9 / 13 / 15

If no: \_\_\_\_\_  
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
B. Name of Individual (Last, First)	Number of Ticket(s)/Pass(es)	Identify one of the following:
Sachi A. Hamai	1	Ceremonial Role <input checked="" type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Participated in County Day Parade
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
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.

Maria Duron                      Maria Duron                      Ticket Admin.                      3/18/16  
Signature of Agency Head or Designee                      Print Name                      Title                      (Month, Day, Year)

Comment: \_\_\_\_\_