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

1. **Agency Name**
   County of Los Angeles
   Board of Supervisor, First District
   Designated Agency Contact (Name, Title)
   Barbara Garcia, Ticket Administrator

2. **Function or Event Information**
   Does the agency have a ticket policy? □ Yes □ No
   Face Value of Each Ticket/Pass $ 35.00
   Event Description: LA Phil
   Ticket(s)/Pass(es) provided by agency? □ Yes □ No
   Date(s) 07 / 09 / 2022
   Was ticket distribution made at the behest of agency official? □ Yes □ No
   If yes: ________________________________
   If no: ________________________________
   Name of Source ________________________________
   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)/Passes</th>
<th>Describe the public purpose made pursuant to the agency's policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>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)/Passes</th>
<th>Identify one of the following:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Ceremonial Role □ Other □ Income □</td>
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<td>If checking “Ceremonial Role” or “Other” describe below:</td>
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<tr>
<th>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>
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</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.

   [Signature of Agency Head or Designee]
   Barbara Garcia
   Administrative Director
   7/29/2022
   (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 Supervisor, First District
Designated Agency Contact (Name, Title)
Barbara Garcia, Ticket Administrator
Area Code/Phone Number E-mail
213-974-4111 bgarcia@bos.lacounty.gov

2. Function or Event Information
Does the agency have a ticket policy? Yes [ ] No [ ]
Face Value of Each Ticket/Pass $ 35.00
Event Description: LA Phil
Date(s) 07 / 09 / 2022
Ticket(s)/Pass(es) provided by agency? Yes [ ] No [ ]
If no: ____________________________ 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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<tr>
<th>A.</th>
<th>Name of Agency, Department or Unit</th>
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<th>B.</th>
<th>Name of Individual (Last, First)</th>
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<th>Identify one of the following:</th>
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| Ceremonial Role [ ] Other [ ] | Income [ ]
If checking "Ceremonial Role" or "Other" describe below: |
| Ceremonial Role [ ] Other [ ] | Income [ ]
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Barbara Garcia
Signature of Agency Head or Designee
Administrative Director
Print Name
Title
7/29/2022 (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
   Division, Department, or Region (if applicable)
   Board of Supervisor, First District
   Designated Agency Contact (Name, Title)
   Barbara Garcia, Ticket Administrator
   Area Code/Phone Number 213-974-4111
   E-mail bgarcia@bos.lacounty.gov

2. Function or Event Information
   Does the agency have a ticket policy? Yes ☐ No ☐
   Face Value of Each Ticket/Pass $ 98.00
   Event Description: LA Phil
   Provide Title/Explanation
   Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☐
   Date(s) 07 / 22 / 2022
   If no: __________________________
   Name of Source
   If yes: __________________________
   Official’s Name (Last, First)
   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.

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   Print Name: __________________________
   Administrative Director: __________________________
   Title: __________________________
   (month, day, year): 7/29/2022

Comment: __________________________
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Designated Agency Contact (Name, Title)  
Barbara Garcia, Ticket Administrator  
Area Code/Phone Number  
213-974-4111  
E-mail  
bgarcia@bos.lacounty.gov

2. Function or Event Information  
Does the agency have a ticket policy?  
Yes □ No □  
Face Value of Each Ticket/Pass $ __________ 175.00  
Event Description: LA Phil  
Provide Title/ Explanation  
Ticket(s)/Pass(es) provided by agency?  
Yes □ No □  
If no: ____________________________  
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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