

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

**A Public Document**

<b>1. Agency Name</b>		Date Stamp	<b>California Form 802</b>
County of Los Angeles			For Official Use Only
Division, Department, or Region (if applicable)			
Department of Youth Development			
Designated Agency Contact (Name, Title)		<input type="checkbox"/> <b>Amendment</b> (Must Provide Explanation in Part 3.)  Date of Original Filing: _____ <small>(month, day, year)</small>	
Zachery Roman, Executive Assistant			
Area Code/Phone Number	E-mail		
213-647-0639	zroman@dyc.lacounty.gov		

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes     No     Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 22

Event Description: L.A. County Fair    Date(s) 05 / 05 / 23    05 / 29 / 23  
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)

**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	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		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)/ Passes	Describe the public purpose made pursuant to the agency's policy
Healing Dialouge and Action	13	Pursuant to ticket policy Section 5.3, I

**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.*

	Zachery Roman	Executive Assistant	05.09.23
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

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

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<b>1. Agency Name</b> County of Los Angeles		Date Stamp	<b>California Form 802</b>
Division, Department, or Region (if applicable) Department of Youth Development		For Official Use Only	
Designated Agency Contact (Name, Title) Zachery Roman, Executive Assistant		<input type="checkbox"/> <b>Amendment</b> (Must Provide Explanation in Part 3.)  Date of Original Filing: _____ <small>(month, day, year)</small>	
Area Code/Phone Number 213-647-0639	E-mail zroman@dyd.lacounty.gov		

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes     No     Face Value of Each Ticket/Pass \$ \_\_\_\_\_ **22**

Event Description: L.A. County Fair    Date(s) \_\_\_\_\_  
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)

**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	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		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)/ Passes	Describe the public purpose made pursuant to the agency's policy
Alma Family Services (AFS)	6	Pursuant to ticket policy Section 5.3, I

**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.*

	Zachery Roman	Executive Assistant	05/15/23
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(month, day, year)</small>

Provided to Eden Aberra to hand out

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

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Division, Department, or Region (if applicable) Department of Youth Development			
Designated Agency Contact (Name, Title) Zachery Roman, Executive Assistant		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _____ (month, day, year)	
Area Code/Phone Number 213-647-0639	E-mail zroman@dyd.lacounty.gov		

**2. Function or Event Information**

Does the agency have a ticket policy? Yes  No  Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 22

Event Description: L.A. County Fair Date(s) \_\_\_\_\_  
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)

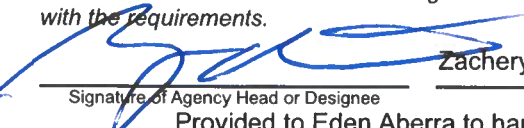
**3. Recipients**

\* 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	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		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)/ Passes	Describe the public purpose made pursuant to the agency's policy
Asian Youth Center (AYC)	6	Pursuant to ticket policy Section 5.3, I

**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.


 \_\_\_\_\_ Zachery Roman \_\_\_\_\_ Executive Assistant \_\_\_\_\_ 05/15/23  
Signature of Agency Head or Designee Print Name Title (month, day, year)

Provided to Eden Aberra to hand out

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

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Department of Youth Development			
<b>Designated Agency Contact</b> (Name, Title)		<input type="checkbox"/> <b>Amendment</b> (Must Provide Explanation in Part 3.)	
Zachery Roman, Executive Assistant		<b>Date of Original Filing:</b> _____ <small>(month, day, year)</small>	
<b>Area Code/Phone Number</b>	<b>E-mail</b>		
213-647-0639	zroman@dyc.lacounty.gov		

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes     No     Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 22

Event Description: L.A. County Fair    Date(s) \_\_\_\_\_  
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)

**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	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		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)/ Passes	Describe the public purpose made pursuant to the agency's policy
California Conference for Equality & Justice	7	Pursuant to ticket policy Section 5.3, I

**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.

Zachery Roman
Executive Assistant
05/15/23  
Signature of Agency Head or Designee      Print Name      Title      (month, day, year)

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

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<b>Designated Agency Contact</b> (Name, Title) Zachery Roman, Executive Assistant		<input type="checkbox"/> <b>Amendment</b> (Must Provide Explanation in Part 3.) <b>Date of Original Filing:</b> _____ <small>(month, day, year)</small>	
<b>Area Code/Phone Number</b> 213-647-0639	<b>E-mail</b> zroman@dyd.lacounty.gov		

## 2. Function or Event Information

Does the agency have a ticket policy? Yes  No  Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 22

Event Description: L.A. County Fair Date(s) \_\_\_\_\_  
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)

## 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	Describe the public purpose made pursuant to the agency's policy
B.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
			Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
			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)/ Passes	Describe the public purpose made pursuant to the agency's policy
	Centinela Youth Services (CYS)	7	Pursuant to ticket policy Section 5.3, I

## 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.


Zachery Roman
Executive Assistant
05/15/23  
Signature of Agency Head or Designee
Print Name
Title
(month, day, year)

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

**Print** **Clear**

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Department of Youth Development			
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Zachery Roman, Executive Assistant		<b>Date of Original Filing:</b> _____ <small>(month, day, year)</small>	
<b>Area Code/Phone Number</b>	<b>E-mail</b>		
213-647-0639	zroman@dyc.lacounty.gov		

## 2. Function or Event Information

Does the agency have a ticket policy?    Yes     No     Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 22

Event Description: L.A. County Fair    Date(s) \_\_\_\_\_  
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)

## 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	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		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)/ Passes	Describe the public purpose made pursuant to the agency's policy
Flintridge Center	6	Pursuant to ticket policy Section 5.3, I

## 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.

Zachery Roman	Executive Assistant	05/15/23
Signature of Agency Head or Designee	Print Name	Title

Provided to Eden Aberra to hand out

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

Print
Clear

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Zachery Roman, Executive Assistant			
<b>Area Code/Phone Number</b>	<b>E-mail</b>	<input type="checkbox"/> <b>Amendment</b> (Must Provide Explanation in Part 3.)	
213-647-0639	zroman@dyc.lacounty.gov	<b>Date of Original Filing:</b> _____ <small>(month, day, year)</small>	

**2. Function or Event Information**

Does the agency have a ticket policy? Yes  No  Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 22

Event Description: L.A. County Fair Date(s) \_\_\_\_\_  
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)

**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	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		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)/ Passes	Describe the public purpose made pursuant to the agency's policy
Inside Out Writers	5	Pursuant to ticket policy Section 5.3, I

**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.*

	Zachery Roman	Executive Assistant	05/15/23
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

Provided to Eden Aberra to hand out

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

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Area Code/Phone Number 213-647-0639	E-mail zroman@dyc.lacounty.gov		

**2. Function or Event Information**

Does the agency have a ticket policy? Yes  No  Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 22

Event Description: L.A. County Fair Date(s) \_\_\_\_\_  
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)


**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	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		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)/ Passes	Describe the public purpose made pursuant to the agency's policy
PCS Family Services (PCS)	6	Pursuant to ticket policy Section 5.3, I

**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.


 \_\_\_\_\_ Zachery Roman \_\_\_\_\_ Executive Assistant \_\_\_\_\_ 05/15/23  
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: Provided to Eden Aberra to hand out



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Department of Youth Development			
<b>Designated Agency Contact</b> (Name, Title)		<input type="checkbox"/> <b>Amendment</b> (Must Provide Explanation in Part 3.)	
Zachery Roman, Executive Assistant			
<b>Area Code/Phone Number</b>	<b>E-mail</b>	<b>Date of Original Filing:</b> _____ <small>(month, day, year)</small>	
213-647-0639	zroman@dyd.lacounty.gov		

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes     No     Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 22

Event Description: L.A. County Fair    Date(s) \_\_\_\_\_  
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)

**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	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
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C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
Soledad Enrichment Action (SEA)	6	Pursuant to ticket policy Section 5.3, I

**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.*

	Zachery Roman	Executive Assistant	05/15/23
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

Provided to Eden Aberra to hand out tickets.

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

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

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Area Code/Phone Number 213-647-0639	E-mail zroman@dyd.lacounty.gov	<input type="checkbox"/> <b>Amendment</b> <i>(Must Provide Explanation in Part 3.)</i> Date of Original Filing: _____ <i>(month, day, year)</i>	

**2. Function or Event Information**

Does the agency have a ticket policy? Yes  No  Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 22

Event Description: L.A. County Fair Date(s) \_\_\_\_\_  
*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)*

**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	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual <i>(Last, First)</i>	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
C. Name of Outside Organization <i>(include address and description)</i>	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
Youth Advocates Program (YAP)	6	Pursuant to ticket policy Section 5.3, I

**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      Zachery Roman      Executive Assistant      05/15/23  
 \_\_\_\_\_  
 Print Name      Title      *(month, day, year)*

Provided to Eden Aberra to hand out

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

**Print**      **Clear**