

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

A Public Document

<b>1. Agency Name</b>		Date Stamp	California Form <b>802</b> For Official Use Only
Los Angeles County			
Division, Department, or Region (if applicable)		<input type="checkbox"/> <b>Amendment</b> (Must Provide Explanation in Part 3.)  Date of Original Filing: _____ <small>(month, day, year)</small>	
Fourth District, Board of Supervisors			
Designated Agency Contact (Name, Title)			
Nancy Herrera, Ticket Administrator			
Area Code/Phone Number	E-mail		
(213) 974-4444	nherrera@bos.lacounty.gov		

**2. Function or Event Information**

Does the agency have a ticket policy? Yes  No  Face Value of Each Ticket/Pass \$ 190 & 75

Event Description: LA Children's Choir, Sounds About Town Date(s) 05 / 07 / 23  
Provide Title/Explanation

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.

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
Board of Supervisors	4	Ticket Policy Sec 5.3(k)
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

**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.*

Nancy Herrera Nancy Herrera Ticket Administrator 6/6/2023  
Signature of Agency Head or Designee Print Name Title (month, day, year)

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

**Print** **Clear**

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Designated Agency Contact (Name, Title)			
Nancy Herrera, Ticket Administrator			
Area Code/Phone Number	E-mail		
(213) 974-4444	nherrera@bos.lacounty.gov		

**2. Function or Event Information**

Does the agency have a ticket policy? Yes  No  Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 116

Event Description: Ziggy Marley Date(s) 05 / 09 / 23  
Provide Title/ Explanation

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.

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


 \_\_\_\_\_ Nancy Herrera \_\_\_\_\_ Ticket Administrator \_\_\_\_\_ 6/6/2023  
Signature of Agency Head or Designee Print Name Title (month, day, year)

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

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Nancy Herrera, Ticket Administrator			
Area Code/Phone Number	E-mail		
(213) 974-4444	nherrera@bos.lacounty.gov		

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes     No     Face Value of Each Ticket/Pass \$ \_\_\_\_\_ **87**

Event Description: Ziggy Marley    Date(s) 05 / 09 / 23    \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Provide Title/ Explanation

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**

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	Nancy Herrera	Ticket Administrator	6/2/2023
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(month, day, year)</small>

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

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Nancy Herrera, Ticket Administrator		Date of Original Filing: _____ <small>(month, day, year)</small>	
Area Code/Phone Number	E-mail		
(213) 974-4444	nherrera@bos.lacounty.gov		

**2. Function or Event Information**

Does the agency have a ticket policy? Yes  No  Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 87

Event Description: Stranger Love Date(s) 05 / 20 / 23  
Provide Title/ Explanation

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**

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	Nancy Herrera	Ticket Administrator	6/6/2023
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

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

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Nancy Herrera, Ticket Administrator			
Area Code/Phone Number	E-mail		
(213) 974-4444	nherrera@bos.lacounty.gov		

**2. Function or Event Information**

Does the agency have a ticket policy? Yes  No  Face Value of Each Ticket/Pass \$ \_\_\_\_\_ **64**

Event Description: Stranger Love Date(s) 05 / 20 / 23  
Provide Title/ Explanation

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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 Signature of Agency Head or Designee	Nancy Herrera Print Name	Ticket Administrator Title	6/6/2023 <small>(month, day, year)</small>
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Comment: \_\_\_\_\_ +



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**2. Function or Event Information**

Does the agency have a ticket policy?    Yes     No     Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 216

Event Description: Salonen, Stravinsky and Bartok    Date(s) 05 / 21 / 23    \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Provide Title/ Explanation

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: \_\_\_\_\_  
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	Nancy Herrera	Ticket Administrator	6/6/2023
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

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

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