Agency Report of: **Ceremonial Role Events and Ticket/Pass Distributions** A Public Document 1. Agency Name California Date Stamp **Form** Los Angeles County For Official Use Only Division, Department, or Region (if applicable) Fourth District, Board of Supervisors **Designated Agency Contact (Name, Title)** Nancy Herrera, Ticket Administrator Amendment (Must Provide Explanation in Part 3.) **Area Code/Phone Number** (213) 974-4444 nherrera@bos.lacounty.gov Date of Original Filing: (month, day, year) 2. Function or Event Information 75 Does the agency have a ticket policy? Face Value of Each Ticket/Pass \$ Yes No 🗆 Event Description: Rodrigo Amarante Date(s) _ Provide Title/ Explanation Walt Disney Concert Hall Ticket(s)/Pass(es) provided by agency? Yes No l Name of Source Was ticket distribution made at the behest Yes No If yes: Official's Name (Last, First) of agency official? 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. Number A. Name of Agency, Department or Unit of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy **Passes** 2 **Board of Supervisors** Pursuant to Ticket Policy Sec 5.3(k) Number B. Name of Individual Identify one of the following: of Ticket(s)/ (Last, First) Passes Ceremonial Role Other Income ... If checking "Ceremonial Role" or "Other" describe below Ceremonial Role Other _ Income If checking "Ceremonial Role" or "Other" describe below Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy C. of Ticket(s)/ (include address and description) Passes 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. **Ticket Administrator** 6/6/2023 Nancy Herrera Title Signature of Agency Head or Designee Print Name (month, day, year)

Comment:

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name California Date Stamp **Form** Los Angeles County For Official Use Only Division, Department, or Region (if applicable) Fourth District, Board of Supervisors **Designated Agency Contact (Name, Title)** Nancy Herrera, Ticket Administrator Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number (213) 974-4444 Date of Original Filing: . nherrera@bos.lacounty.gov (month, day, year) 2. Function or Event Information 133 Does the agency have a ticket policy? Face Value of Each Ticket/Pass \$ _ Yes ■ No □ Event Description: Rodrigo Amarante 21 Provide Title/ Explanation If no: Walt Disney Concert Hall Ticket(s)/Pass(es) provided by agency? Yes No Name of Source Was ticket distribution made at the behest Yes ☐ No ■ Official's Name (Last, First) of agency official? 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. Number Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit A. of Ticket(s)/ Passes Pursuant to Ticket Policy Sec 5.3(k) 2 **Board of Supervisors** Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) Passes Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below. Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below Number Name of Outside Organization of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy C. (include address and description) Passes

4.	Vo	rific	atio	m
4	ve	PITIC	anio	m

C

I have read and understand FPPC Regulations	18944.1 and 1894	2. I have v	verified that the	distribution se	et forth above,	is in accordance
with the requirements.						

Y	anon Herrera	Nancy Herrera	Ticket /
ı	Signature of Agency Head or Designee	Print Name	

Ticket Administrator 6/6/2023
Title (month, day, year)

omment:	+

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

1.	Agency Name				Date Stamp	California 202	
	Los Angeles County					Form OUZ	
	Division, Department, or Region (if applicable)					For Official Use Only	
	Fourth District, Board of Supervisors						
	Designated Agency Contact (Name, Title)					
	Nancy Herrera, Ticket Admi	nistrator			Amendment (Must F	Provide Explanation in Part 3.)	
	Area Code/Phone Number	E-mail		· · ·			
	(213) 974-4444	nherrera@bo	os.lacounty.gov		Date of Original Filing:	(month, day, year)	
2.	Function or Event Infor	mation				100	
	Does the agency have a tick	ket policy?	Yes 🗌 No 🔳	Face Value of	Each Ticket/Pass \$ _	199	
	Event Description: Schuma	nn and Scheh	erazade	Date(s)4	, 22 , 23		
	Ticket(s)/Pass(es) provided	Provide Til	tle/ Explanation Yes No	If no: Walt Dis	sney Concert Hall		
	(o) acc(co) provided	-, -g, .			Name of Source		
	Was ticket distribution made at the behest Yes No lf yes:						
3.	Recipients						
	• Use Section A to identify the agen	cy's department o	r unit. • Use Section B	to identify an individu	ial. Use Section C to identif	fy an outside organization.	
	A. Name of Agency, Department or Unit			Describe the public purpose made pursuant to the agency's policy			
	Board of Supervisors		2	Pursuant to	Ticket Policy Sec 5.3	(k)	
	B. Name of Indi (Last, Fire		Number of Ticket(s Passes		Identify one of the f		
					king "Ceremonial Role" or "Other" de		
					nonial Role Other cling "Ceremonial Role" or "Other" de		
	C. Name of Outside O		Number of Ticket(s Passes)/ Describe th	e public purpose made pur	suant to the agency's policy	
	Verification						
4.	I have read and understand FP with the requirements.	PC Regulations	: 18944.1 and 1894	2. I have verified t	that the distribution set fo	orth above, is in accordance	
	Nhow Helmes Nancy Herrera			Ticke	Ficket Administrator 6/6/2023		
	Signature of Agency Head or Designee Print Name				Title	(month, day, year)	
	Comment:			<u>+</u>			

A Public Document

	gency Report of: eremonial Role Even	ts and Ticket/P	ass Distri	butions	A	Public Document
1.	Agency Name				Date Stamp	California 802
	Los Angeles County					101111
	Division, Department, or Region (if applicable)				1	For Official Use Only
	Fourth District, Board of Su	pervisors				
	Designated Agency Contact	(Name, Title)			1	
	Nancy Herrera, Ticket Admi	inistrator			Amendment (Must Pr	ovido Evolanation in Part 3 l
	Area Code/Phone Number	E-mail			Amendment (Musi Pi	ovide Explanation in Part 3.)
VIII.	(213) 974-4444	nherrera@bos.laco	unty.gov		Date of Original Filing: _	(month, day, year)
2.	Function or Event Infor	mation				100
	Does the agency have a ticl	ket policy? Yes	■ No □ F	ace Value of	Each Ticket/Pass \$	190
	Event Description: Tchailko			oto(a) 04	, 28 , 23	1 1
	Event Description.	Provide Title/ Explar	nation			
	Ticket(s)/Pass(es) provided	by agency? Yes [□ No 🔳 If	no: Walt Dis	sney Concert Hall	
					Name of Source	
	Was ticket distribution made of agency official?	e at the behest Yes [□ No 🔳 👫	yes:	Official's Name (Last, First)	
3.	Recipients • Use Section A to identify the ager	ncy's department or unit. • !	Use Section B to i	dentify an individu	ual. Use Section C to identify	an outside organization.
	A. Name of Agency, Depa	Number of Ticket(s)/ Passes	Describe th	the public purpose made pursuant to the agency's policy		
	Board of Supervisors	2	Pursuant to	rsuant to Ticket Policy Sec 5.3(k)		
	B. Name of Indi		Number of Ticket(s)/ Passes		Identify one of the fo	llowing:
				1	nonial Role Other Sking "Ceremonial Role" or "Other" des	Income Income
				1	nonial Role Other Other design "Ceremonial Role" or "Other" design	Income I
	C. Name of Outside O (include address and	Number of Ticket(s)/ Passes	Describe th	e public purpose made purs	uant to the agency's policy	
		1				
	Verification	PPC Pagulations 19044	1 and 19042	have varified	that the distribution set fo	th shove is in accordance
	I have read and understand FF with the requirements.	ro Regulations 16944.	. i aliu 16942. i	nave venned t	กละเกษ นารเกมนแบก 501 10	ит ароче, із її ассотцапсе
	Marcha HILLANDE	Nancy Herrer	а	Ticke	et Administrator	6/6/2023
1	Signature of Agency Head or Design		int Name		Title	(month, day, year)

Comment:

Agency Report of:

Ceremonial Role Events and Ticket/Pass Distributions	A Public Document		
1. Agency Name	Date Stamp	California 802	

1.	Agency Name			Date Stamp	California 802		
	Los Angeles County Division, Department, or Region (if applicable) Fourth District, Board of Supervisors					TOTAL	
					1	For Official Use Only	
	Designated Agency Contact	Name, Title)		0.000	1		
	Nancy Herrera, Ticket Administrator				Amendment (Must Provide Explanation in Part 3.)		
	Area Code/Phone Number E-mail						
	(213) 974-4444	nherrera@bos.la	county.gov		Date of Original Filing:	(month, day, year)	
2.	Function or Event Infor	mation				00	
	Does the agency have a tick	ket policy? Ye	s No 🗆	Face Value of	Each Ticket/Pass \$	90	
	Event Description: Tchailko	vsky & Ades		Date(s)04	, 28 , 23		
	Provide Title/ Explanation			sney Concert Hall			
	Was ticket distribution made at the behest Yes ☐ No ☐ If yes:						
	of agency official?	at the benest ye	S LI NO	, 00	Official's Name (Last, First)		
3.	Recipients • Use Section A to identify the agen	cy's department or unit.	• Use Section B to	identify an individu	ual. Use Section C to identif	fy an outside organization.	
	A. Name of Agency, Depa	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's p				
	Board of Supervisors		2	Pursuant to	Ticket Policy Sec 5.3	(k)	
	B. Name of Indi (Last, Fir		Number of Ticket(s)/ Passes		Identify one of the f	Income	
					nonial Role Other king "Ceremonial Role" or "Other" de		
	C. Name of Outside Organization (include address and description)		Number of Ticket(s)/ Passes	Describe th	e public purpose made pur	suant to the agency's policy	
4.	Verification I have read and understand FF with the requirements.	PC Regulations 189	44.1 and 18942.	I have verified to	that the distribution set fo	orth above, is in accordance	
1	Nancy Herrera			Ticke	et Administrator	6/6/2023	
1	Signature of Agency Head or Designee Print Name				Title	(month, day, year)	
	Comment:						