

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

**A Public Document**

<b>1. Agency Name</b> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">LA County</div> <small>Division, Department, or Region (If Applicable)</small> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">BOS, Third District</div> <small>Designated Agency Contact (Name, Title)</small> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">Yolanda Valadez</div> <small>Area Code/Phone Number</small> <small>E-mail</small> <div style="border: 1px solid black; padding: 2px; margin-bottom: 5px;">(213) 974-3333    yolvaladez@bos.lacounty.gov</div>	Date Stamp  <input type="checkbox"/> Amendment (Must provide explanation in Part 3.) Date of Original Filing: <span style="border: 1px solid black; display: inline-block; width: 100px; height: 20px; vertical-align: middle;"></span> <small>(Month, Day, Year)</small>	California Form <b>802</b> For Official Use Only
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**2. Function or Event Information**

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

Event Description     Date(s)  /  /      /  /

Ticket(s)/Pass(es) provided by agency?    Yes     No     If no: Hollywood Bowl  
Name of Source

Was ticket distribution made at the behest of agency official?    No     Yes     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
BOS, Third District Community Org.'s		Pursuant to ticket Policy Section 5.3(k)
B. Name of Individual (Last, First)	Number of Ticket(s)/Pass(es)	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)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
LA Poet Society SFV 8, Better Youth 23		Mujeres ALFA Internacional Org. 12, Radio OUN 10
Tia Chucha's Centro Cultural 28		New Economics For Women Family Source 12

**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.*

	Yolanda Valadez	Ticket Administrator	12/31/2023
<small>Signature of Agency Head or Designee</small>	<small>Print Name</small>	<small>Title</small>	<small>(Month, Day, Year)</small>

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**Agency Report of:  
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Continuation Sheet**

**Agency Name**

BOS, Third District

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**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
El Cetro De Amistad 10		AVIVA Children & Family Services 10, Rotary Club Calabasas 10
Palma Beautiful 10, Project Angel Food 10		Golden Heart Ranch 12, Emergency Prep. Calabasas 10
Temple Judea Tarzana 10		Valley Storefront JFS 8, LA Jewish Home 12, St Sebastian 20
Canyon Sages Seniors 20, Valley Village 8		West Valley Boys & Girls Club 10, Boys & Girls Club of Malibu 10

B. Name of Individual (Last, First)	Number of Ticket(s)/ Pass(es)	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>
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		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 (Include address and description)	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy
Studio City Residents Assoc. 12		Mariachi Maestro Apprentice Program 18,
Sylmas Womens Club 10		Pacific Palisades Taskforce on Homelessness 20
Venice Community Housing 10		SFV Community Menal Health 10, Hope of the Valley 10
Boys & Girls Club of Santa Monica 8		JFS Comprehensive Services Center 10,