

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

**A Public Document**

**1. Agency Name**

County of Los Angeles  
 Division, Department, or Region (If Applicable)  
 Department of Youth Development  
 Designated Agency Contact (Name, Title)  
 Zachery Roman, Executive Assistant  
 Area Code/Phone Number E-mail  
 213-647-0639 zroman@dyc.lacounty.gov

Date Stamp  
 California Form **802**  
 For Official Use Only  
 Amendment (Must provide explanation in Part 3.)  
 Date of Original Filing: \_\_\_\_\_  
 (Month, Day, Year)

**2. Function or Event Information**

Does the agency have a ticket policy? Yes  No   
 Event Description L.A. County Fair  
 Provide Title/Explanation  
 Ticket(s)/Pass(es) provided by agency? Yes  No   
 Was ticket distribution made at the behest of agency official? No  Yes

Face Value of Each Ticket/Pass \$ 30  
 Date(s) 05/03/24 05/27/24  
 If no: \_\_\_\_\_  
 Name of Source  
 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
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"/> If checking "Ceremonial Role" or "Other" describe below:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> If checking "Ceremonial Role" or "Other" describe below:
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
PCS	12	Pursuant to ticket policy Section 5.3.1
Helpline Youth Counseling	10	Pursuant to ticket policy Section 5.3.1

**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 05.01.24  
 Signature of Agency Head or Designee Print Name Title (Month, Day, Year)

Comment: Provided to Shinmeka Clark to hand out