**Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions** A Public Document 1. Agency Name Date Stamp California Los Angeles County Form 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 Does the agency have a ticket policy? Face Value of Each Ticket/Pass \$ . Yes 🔳 No 🗌 Event Description: Big Band Night Provide Title/Explanation If no: Hollywood Bowl Ticket(s)/Pass(es) provided by agency? Yes No 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 A. Name of Agency, Department or Unit of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy Passes Number B. Name of Individual Identify one of the following: of Ticket(s)/ (Last, First) Passas Ceremonial Role Income Other If checking "Ceremonial Role" or "Other" describe below Other Ceremonial Role Income If checking "Ceremonial Role" or "Other" describe below Number Name of Outside Organization C. of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy (include address and description) Passes AOC7 Neighborhood Organization, E. 10th St 8 Ticket Policy Sec 5.3(i) Joining residents, schools, community partner

## 4. Verification

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with the requirements.					
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ſ	Sign	ature of Age	ency Head or Designee

Nancy Herrera

Ticket Administrator

8/13/2024

Print Name

Title

(month, day, year)

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i nave read and understand FPPC Regulation	18 18944.1 and 18942. I nave	e verified that the distribution set fo	rth above, is in accordance
with the requirements.			

Ticket Policy Sec 5.3(i)

Passes

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X	aren Herrera	Nancy Herrera	Ticket Administrator
V	Signature of Agency Head or Designee	Print Name	Title

(month, day, year)

8/13/2024

Bixby Knolls Community Foundation, 4321 Att

Support of businesses growth & vibrant neigh

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## 4. Verification

Comment:

with the requirements.	ulations 16944.1 and 18942.	i nave ventied that the distribution set forth	above, is in accordance
$\mathcal{M}$	Nancy Herrera	Ticket Administrator	8/13/2024
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

Print

Clear

FPPC Form 802 (2/2016) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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## **Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions** A Public Document 1. Agency Name Date Stamp California **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 E-mail (213) 974-4444 nherrera@bos.lacounty.gov Date of Original Filing: . (month, day, year) 2. Function or Event Information \$35.00 Does the agency have a ticket policy? Face Value of Each Ticket/Pass \$ . Yes 🔳 No 🗌 Event Description: Big Band Night Date(s) \_\_7\_\_/\_17\_\_/ Provide Title/Explanation If no: Hollywood Bowl Ticket(s)/Pass(es) provided by agency? Yes No No 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 Name of Agency, Department or Unit A. Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ Passes 3 **Board of Supervisors** Ticket Policy Sec 5.3(k) Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) Passes Ceremonial Role Income Other If checking "Ceremonial Role" or "Other" describe below:

<u>.</u>			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:
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
erific	ation		

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance

**Ticket Administrator** 

Title

**Print** 

with the requirements

Comment:

Signature of Apericy Head or Designee

Clear

Print Name

Nancy Herrera

FPPC Form 802 (2/2016)

8/13/2024

(month, day, year)