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

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1.	Agency Name				Date Stamp	California OOO	
	Los Angeles County					Form 802	
	Division, Department, or Reg	ion (if applicable)		For Official Use Only			
	Fourth District, Board of Su	pervisors					
	Designated Agency Contact						
	Nancy Herrera, Ticket Adm	inistrator					
	Area Code/Phone Number				Amendment (Must Provide Explanation in Part 3.)		
	(213) 974-4444	nherrera@bos.la	acounty.gov		Date of Original Filing:	(month, day, year)	
2.	Function or Event Infor	mation					
	Does the agency have a ticl	ket policy?	Face Value of I	Each Ticket/Pass \$	125 & 80		
	Event Description: Hallowe		, 31 , 24				
	Event Description:	Provide Title/ E.					
	Ticket(s)/Pass(es) provided		sney Concert Hall				
					Name of Source		
	Was ticket distribution made	at the behest Ye	es 🗌 No 🔳	If yes:	Official's Name (Last, First)		
	of agency official?				Omorar o rearro (Edot, 1 moly		
3.	Recipients • Use Section A to identify the agen	cy's department or unit	. • Use Section B to	identify an individu	al. Use Section C to identif	y an outside organization.	
	A. Name of Agency, Depa	Number of Ticket(s)/ Passes		Describe the public purpose made pursuant to the agency's policy			
	Board of Supervisors		4	Ticket Polic	y Sec 5.3(k)		
	B. Name of Indi (Last, Fire		Number of Ticket(s)/ Passes		Identify one of the f	ollowing:	
					onial Role Other ing "Ceremonial Role" or "Other" des	-	
				I	onial Role Other ing "Ceremonial Role" or "Other" des	Income Income	
	C. Name of Outside Or (include address and		Number of Ticket(s)/ Passes	Describe the	e public purpose made pur	suant to the agency's policy	
	Verification	DO D 4 # 1755					
	I have read and understand FP with the requirements. 1 /	PC Regulations 189	144.1 and 18942.	I have verified th	hat the distribution set fo	orth above, is in accordance	
_	A A	4 Noneclie	t Λolmainistastas	4414010004			
	Signature of Agency Head or Design	Nancy Her	t Administrator	11/12/2024			
	2- Orchestra - 2-		Print Name		Title	(month, day, year)	
	Comment:					+	