

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

A Public Document

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| 1. Agency Name Los Angeles County Division, Department, or Region <i>(if applicable)</i> Fourth District, Board of Supervisors Designated Agency Contact <i>(Name, Title)</i> Nancy Herrera, Ticket Administrator Area Code/Phone Number E-mail (213) 974-4444 nherrera@bos.lacounty.gov | | Date Stamp | California Form 802 For Official Use Only |
| | | <input type="checkbox"/> Amendment <i>(Must Provide Explanation in Part 3.)</i> Date of Original Filing: _____ (month, day, year) | |

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ _____ 195

Event Description: Zubin Mehta Conducts Gurelzieder Date(s) 12 / 15 / 24 _____
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: Walt Disney Concert Hall
Name of Source

Was ticket distribution made at the behest of agency official? Yes No 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)/ Passes | 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 Individual (Last, First) | | |
| | Number of Ticket(s)/ Passes | 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)/ Passes | Describe the public purpose made pursuant to the agency's policy |
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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.

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|--------------------------------------|-----------------------------|-------------------------------|------------------------------|
| Signature of Agency Head or Designee | Nancy Herrera Print Name | Ticket Administrator Title | 1/8/25 (month, day, year) |
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Comment: _____ +