Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California Form County of Los Angeles Division, Department, or Region (if applicable) For Official Use Only Board of Supervisor, First District Designated Agency Contact (Name, Title) Patricia Ramirez, Ticket Administrator ☐ Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail 213-974-4111 paramirez@bos.lacounty.gov Date of Original Filing: _ (month, day, year) 2. Function or Event Information Does the agency have a ticket policy? Face Value of Each Ticket/Pass \$ __ Yes ■ No □ Date(s) 6 / 10 Event Description: LA Phil Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? If no: _ Yes No Was ticket distribution made at the behest Yes ☐ No ■ If yes: _ 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** Number B. Name of Individual of Ticket(s)/ Identify one of the following: (Last, First) **Passes** Ceremonial Role Other 🗌 Income If checking "Ceremonial Role" or "Other" describe below: Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization C. Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ (include address and description) Passes California Conservation Corp 2 Per ticket policy 5.3 (i)

4. Verification

Comment:

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

Oft	Patricia Ramirez	Office Manager	6/26/2025
Signature of Agency Head or Designee	Print Name	Title	(month, day, year)

Print

Clear

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