pency Name punty of Los Angeles vision, Department, or Regord of Supervisor, First I signated Agency Contact stricia Ramirez, Ticket Adea Code/Phone Number 3-974-4111	District (Name, Title)			Date Stamp	California Form 802 For Official Use Only
vision, Department, or Regord of Supervisor, First I signated Agency Contact stricia Ramirez, Ticket Adea Code/Phone Number 3-974-4111	District (Name, Title) ministrator E-mail				
pard of Supervisor, First I signated Agency Contact stricia Ramirez, Ticket Ad ea Code/Phone Number 3-974-4111 sunction or Event Infor	District (Name, Title) ministrator E-mail	1			For Official Use Only
signated Agency Contact tricia Ramirez, Ticket Ad ea Code/Phone Number 3-974-4111 Inction or Event Infor	(Name, Title) ministrator E-mail				
signated Agency Contact tricia Ramirez, Ticket Ad ea Code/Phone Number 3-974-4111 Inction or Event Infor	(Name, Title) ministrator E-mail			1	
tricia Ramirez, Ticket Ad ea Code/Phone Number 3-974-4111 Inction or Event Infor	ministrator E-mail				
ea Code/Phone Number 3-974-4111 Inction or Event Infor	E-mail				
3-974-4111 Inction or Event Infor				Amendment (Must Provide Explanation in Part 3.)	
ınction or Event Info	paramilez@bos.iac	county gov		Date of Original Filing:	
	paramilez@bos.iacounty.g			(month, day, year)	
200	mation				4
es the agency have a tic	ket policy? Yes	■ No □ F	Face Value of	Each Ticket/Pass \$	\$100.00
			7	. 19 . 2025	
ent Description: LA Phil	Provide Title/ Explai		Date(s)	<u>, 19 , 202</u>	
ket(s)/Pass(es) provided			f no		
ricket(s)/r ass(cs) provided by agoncy:			Name of Source		
as ticket distribution made	e at the behest Yes [	J No ■ I	f yes:	Off.: # N # 1 5: 0	
				Official's Name (Last, First)	
Recipients					
Use Section A to identify the age	ncy's department or unit.	Use Section B to i	identify an individu	ual. Use Section C to identify an	outside organization.
A Name of Agency Department or Unit			Number of Ticket(s)/ Describe the public pu		nt to the agency's policy
A. Name of Agency, Department or Unit		Passes Describe th			
B. Name of Individual (Last. First)		of Ticket(s)/	Identify one of the following:		wing:
		1 03303	C	ial Bala 🔲 Other 🗍	Income
					and the second s
					Income
			II Check	ang deremonia Note of Other describe	below.
C. Name of Outside Organization				nt to the agency's policy	
' (include address and	l description)	Passes			
ELAC Students		4 Per ticket polic		icv 5 3 (i)	
ELAC Students		4	T of tioner policy o.o (i)		
rification					
	DC Pegulations 19044	1 and 19042	I have verified t	that the distribution set forth	ahove is in accordance
	PC Regulations 16944.	1 anu 10942.	i nave venneu i	mat the distribution set forth	above, is in accordance
		rez Offic		e Manager	8/12/2025
signature of Agency Head or Design	iee Pr	in Name		riuc	(month, day, year)
F RU	ecipients Use Section A to identify the agent Use Section A to identify the agent Name of Agency, Depart Name of Outside Of (include address and Understand From the requirements.  Ignature of Agency Head or Design	ecipients Use Section A to identify the agency's department or unit.  Name of Agency, Department or Unit  Name of Individual (Last, First)  Name of Outside Organization (include address and description)  LAC Students  ification  we read and understand FPPC Regulations 18944. The requirements.  Patricia Ramin	ecipients Use Section A to identify the agency's department or unit.  Name of Agency, Department or Unit  Number of Ticket(s)/ Passes  Name of Outside Organization (Include address and description)  LAC Students  A  Patricia Ramirez	ecipients  See Section A to identify the agency's department or unit. *Use Section B to identify an individual Number of Ticket(s)/ Passes  Name of Agency, Department or Unit Number of Ticket(s)/ Passes  Ceren If check  Name of Outside Organization (include address and description)  LAC Students  A Per ticket publication  We read and understand FPPC Regulations 18944.1 and 18942. I have verified to the requirements.  Patricia Ramirez  Office Ignature of Agency Head or Designee  Print Name	sticket distribution made at the behest Yes  No  from

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

Agency Report of: