Agency Report of: **Ceremonial Role Events and Ticket/Pass Distributions** A Public Document 1. Agency Name California Date Stamp **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 Date of Original Filing: _ (213) 974-4444 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: Halloween Organ, Film & Music Date(s) 10 / 31 / Provide Title/ Explanation If no: Walt Disney Concert Hall Ticket(s)/Pass(es) provided by agency? Yes 🗌 No 🔳 Name of Source 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 Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit A. of Ticket(s)/ Passes Number Name of Individual B. of Ticket(s)/ Identify one of the following: (Last, First) Passes Other Ceremonial Role Income ___ If checking "Ceremonial Role" or "Other" describe below Other Income Ceremonial Role If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ C. (include address and description) Passes Rotary Club of Bellflower, 10769 S. Street, Ce Ticket Policy Sec 5.3(i) To serve community through volunteer efforts

4. Verification

Comment:

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

Signature of Adency Head or Designee

Nancy Herrer

Print

Ticket Administrator

10/19/2025

Signature of Agency/Head or Designer

Print Name

Title

(month, day, year)

+

Clear

FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)