

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

**A Public Document**

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

**2. Function or Event Information**

Does the agency have a ticket policy? Yes  No  Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 224

Event Description: John Williams & Rachmaninoff Date(s) 3 / 15 / 26  
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"/><br><small>If checking "Ceremonial Role" or "Other" describe below.</small> |
|   |                             | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/><br><small>If checking "Ceremonial Role" or "Other" describe below.</small> |
|   |                             |  |
| 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   |
|   |                             |  |
|   |                             |  |

**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.*

|                                      |               |                      |                    |
|--------------------------------------|---------------|----------------------|--------------------|
|                                      | Nancy Herrera | Ticket Administrator | 4/29/26            |
| Signature of Agency Head or Designee | Print Name    | Title                | (month, day, year) |

Comment: \_\_\_\_\_ +