

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

A Public Document

1. Agency Name		Date Stamp	California Form 802
County of Los Angeles			For Official Use Only
Division, Department, or Region (if applicable)			
DPSS, OSS, CPAD, Toy Loan and Workplace Giving Program			
Designated Agency Contact (Name, Title)		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: _____ <small>(month, day, year)</small>	
Maricor Garaniel, Volunteer Programs Coordinator I			
Area Code/Phone Number	E-mail		
323-986-2734	mariacorazongaraniel@dpss.lacounty.gov		

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ _____ 20.00

Event Description: LA County Fair 2026 Date(s) 05/07/2026 _____ 05/31/2026 _____
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes No If no: LA County Fair Association
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
East Los Angeles Service Center	6	(Refer to Ticket Policy)
Pomona Health and Wellness	6	(Refer to Ticket Policy)
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Rosa Avalos	4	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <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
El Nido Family Services 2512 West Manchester Avenue Los Angeles, CA 90047	5	(Refer to Ticket Policy)
LA Care and Blue Shield Promise Community Resource Center 2072 E. Palmdale Blvd. Palmdale. CA 93550	6	(Refer to Ticket 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.

Liliana Ramirez Digitally signed by Liliana Ramirez Date: 2026.05.20 09:58:22 -0700 Lilliana Ramirez ASM II 5/20/2026
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: _____

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

Agency Name
County of Los Angeles

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
Florence-Firestone Community Service Center	5	(Refer to Ticket Policy)
South Whittier Community Resource Center	5	(Refer to Ticket Policy)
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"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
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
New Economics for Women Van Nuys Family Source Center 6946 Van Nuys Blvd, Suite 220 Van Nuys, CA 91405	5	(Refer to Ticket Policy)
Madison Elementary 515 E. Ashtabula St. Pasadena, CA 91104	6	(Refer to Ticket Policy)
Los Angeles Mission College Child Development Center 855 North Vermont Los Angeles, CA 90029	5	(Refer to Ticket Policy)
Helpline Youth Counseling 14181 Telegraph Street Rd. Whittier, CA 90604	5	(Refer to Ticket Policy)

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