

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

**A Public Document**

<b>1. Agency Name</b>		Date Stamp	<b>California Form 802</b>
Los Angeles County Department of Public Social Services			For Official Use Only
Division, Department, or Region (if applicable)			
Contract Administration and Monitoring Division			
Designated Agency Contact (Name, Title)		<input type="checkbox"/> Amendment (Must Provide Explanation in Part 3) Date of Original Filing: _____ <small>(month, day, year)</small>	
Eliette Contreras, ASM I			
Area Code/Phone Number	E-mail		
(562) 908-3580	ElietteContreras@dps.lacounty.gov		

**2. Function or Event Information**

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

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

Ticket(s)/Pass(es) provided by agency?    Yes     No     If no: Los Angeles 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
Crystal Stairs, Inc.	7	Per Ticket Policy (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"/> <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

**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.*

Eliette Contreras    Eliette Contreras    ASM I    05/05/26  
Signature of Agency Head or Designee    Print Name    Title    (month, day, year)

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


Print
Clear

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

Agency Name  
 Los Angeles County Department of Public Social Services

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
Crystal Stairs, Inc. <input type="checkbox"/>	7	LA County Fair Tickets <input type="checkbox"/>
		Ticket #s: 479 - 485
		X  <input type="checkbox"/>
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>
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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
		<input type="checkbox"/>

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