

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

A Public Document

**1. Agency Name**

County of Los Angeles  
 Division, Department, or Region (If Applicable)  
 Board of Supervisors, First District  
 Designated Agency Contact (Name, Title)  
 Megan Moret, Ticket Administrator  
 Area Code/Phone Number: 213-974-4111 E-mail: mmoret@bos.lacounty.gov

Date Stamp: \_\_\_\_\_

**California Form 802**  
 For Official Use Only

Amendment (Must provide explanation in Part 3.)  
 Date of Original Filing: \_\_\_\_\_ (Month, Day, Year)

**2. Function or Event Information**

Does the agency have a ticket policy? Yes  No

Event Description: LA Phil  
Provide Title/Explanation

Ticket(s)/Pass(es) provided by agency? Yes  No

Was ticket distribution made at the behest of agency official? No  Yes

Face Value of Each Ticket/Pass \$ 168  
 Date(s) 1 / 22 / 2015

If no: LA Phil  
Name of Source

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)/Pass(es)	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual (Last, First)	Number of Ticket(s)/Pass(es)	Identify one of the following:
Debra Martin	2	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Per Ticket Policy 5.3(g)
		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)/Pass(es)	Describe the public purpose made pursuant to the agency's policy

**4.** (d)(5)

44.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Megan Moret  
Print Name

Ticket Administrator  
Title

01/14/2015  
(Month, Day, Year)