

**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>
County of Los Angeles			For Official Use Only
Division, Department, or Region (If Applicable)			
Board of Supervisors, First District			
<b>Designated Agency Contact (Name, Title)</b>			
Megan Moret, Ticket Administrator			
<b>Area Code/Phone Number</b>	<b>E-mail</b>	<input type="checkbox"/> <b>Amendment</b> (Must provide explanation in Part 3.)	
213.974.4111	mmoret@bos.lacounty.gov	<b>Date of Original Filing:</b> _____ <small>(Month, Day, Year)</small>	

**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) 3 / 10 / 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
Board of Supervisors Staff	4	Per ticket policy 5.3 (k)
B. Name of Individual (Last, First)	Number of Ticket(s)/Pass(es)	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)/Pass(es)	Describe the public purpose made pursuant to the agency's policy

**4. Verification**

(d)(5) \_\_\_\_\_ and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Megan Moret Ticket Administrator 3/13/15

Print Name Title (Month, Day, Year)

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