

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

A Public Document

1. Agency Name County of Orange Division, Department, or Region (if applicable) Board of Supervisors, Third District Designated Agency Contact (Name, Title) Tara Campbell, Chief of Staff Area Code/Phone Number 714-834-3330 E-mail tara.campbell@bos3.oc.gov		Date Stamp	California Form 802 For Official Use Only
		☐ Amendment (Must Provide Explanation in Part 3.) Date of Original Filing: 08/03/2026 (month, day, year)	

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐ Face Value of Each Ticket/Pass \$ _____ \$100
Event Description: Pageant of the Masters Date(s) 08 / 26 / 2026
Provide Title/Explanation
Ticket(s)/Pass(es) provided by agency? Yes ☐ No ☒ If no: City of Laguna Beach
Name of Source
Was ticket distribution made at the behest of agency official? Yes ☐ No ☒ If yes: _____
Official's Name (Last, First)

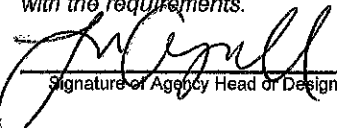
3. Recipients

• 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
	Third Supervisorial District staff	4	County Ticket Distribution Policy, Section 1(C)(1)(g)
B.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
			Ceremonial Role ☐ Other ☐ Income ☐ If checking "Ceremonial Role" or "Other" describe below:
			Ceremonial Role ☐ Other ☐ Income ☐ If checking "Ceremonial Role" or "Other" describe below:
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.

 Tara Campbell Chief of Staff 08/03/2026
Signature of Agency Head or Designee Print Name Title (month, day, year)
Comment: _____

Print

Clear