Agency Report of:

Ceremonial Role Events and Ticket/Pass Distributions		A Public Document
I. Agency Name City of Ontario	Date Stamp	California 802
Division, Department, or Region (if applicable)		For Official Use Only CLITY CLERK'S OF RCVD JAN14'22
Designated Agency Contact (Name, Title)		
Scott Ochoa, City Manager	Amendment (M	lust Provide Explanation in Part 3.)

	City of Ontario Division, Department, or Region (if applicable)				-	For Official Use Only
						ROVD JAN14'22
	Designated Agency Contact	(Name, Title)				
	Scott Ochoa, City Manager				Amendment (Must Provide Explanation in Part 3.)	ovide Explanation in Part 3.)
	Area Code/Phone Number	E-mail				
	909-395-2000	sochoa@ontarioca	.gov		Date of Original Filing:	(month, day, year)
2.	Function or Event Infor	mation			M.	07.00
	Does the agency have a tick	ket policy? Yes	■ No 🗆 F	ace Value of	Each Ticket/Pass \$	67.00
	Event Description: Trans-Si	berian Orchestra 3:3	30 p.m. [Date(s)		
	Ticket(s)/Pass(es) provided	Provide Title/ Expla by agency? Yes		f no:		
	., .,.			f yes: Ochoa,	Name of Source	
	Was ticket distribution made	at the behest Yes	■ No 🗆 📑	f yes:	Official's Name (Last, First)	
	of agency official?				,	
	Use Section A to identify the agen Name of Agency, Department		Use Section B to i Number of Ticket(s)/ Passes		ual. Use Section C to identify e public purpose made pursu	
	B. Name of Indi		Number of Ticket(s)/ Passes		Identify one of the fol	lowing:
Leon, Paul Bowman, Ji	Leon, Paul		6		onial Role Other Other ing "Ceremonial Role" or "Other" descrift), (n)	Income
	Bowman, Jim		2	Cerem	onial Role Other ing "Ceremonial Role" or "Other" descri	Income Income
				Section 4, (f), (n)	
	C. Name of Outside Or (include address and		Number of Ticket(s)/ Passes	Describe the	e public purpose made pursu	ant to the agency's policy
1. \	Verification /					
1	have read and understand FPI	PC Regulations 18944.	1 and 18942.	l have verified t	hat the distribution set fort	h above, is in accordance
١	with the requirements.	Scott Ochoa		011 4	Manager	01/14/22

II TOIIIIOUUVII	4.	Verification
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ture of Agency Head or Designee

Print Name

(month, day, year)

Comment: All tickets provided pursuant to Sections 3.5.1 & 3.5.2 of the Comm. Events Center Operating Agrmnt: 7/1/163

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



D	Intente				
 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. Number 					
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В.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:		
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:		
Vale	ncia, Ruben	6	Section 4, (f), (n)		
			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:		
Mur	phy, Scott	2	Section 4, (n), (o)		
			Ceremonial Role Other Income 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		
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10-					

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