Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California City of Ontario **Form** Division, Department, or Region (if applicable) For Official Use Only RCVD MAYO Designated Agency Contact (Name, Title) Scott Ochoa, City Manager ☐ Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail 909-395-2000 Date of Original Filing: sochoa@ontarioca.gov (month, day, year) 2. Function or Event Information 67.00 Does the agency have a ticket policy? Face Value of Each Ticket/Pass \$ Yes No 🗆 Event Description: Mercy Me Date(s) Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes 🔳 No 🔲 Name of Source If yes: Ochoa, Scott Was ticket distribution made at the behest Yes ■ No □ Official's Name (Last, First) of agency official? 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. Number Name of Agency, Department or Unit Α. of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy Passes Number Name of Individual В. Identify one of the following: of Ticket(s)/ (Last, First) **Passes** Ceremonial Role Other Income __ If checking "Ceremonial Role" or "Other" describe below. Leon, Paul 10 Section 4, (f), (n) Ceremonial Role Other 🔲 Income . Houde, Adam If checking "Ceremonial Role" or "Other" describe below. 6 Section 4, (f), (n) Number Name of Outside Organization C. Describe the public purpose made pursuant to the agency's policy

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4. Verification	on

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

of Ticket(s)/

Passes

(include address and description)

Scott Ochoa

City Manager

05/02/22

Signature of Agency Head or Designee

Print Name

Title

(month, day, year)

Comment: All tickets provided pursuant to Sections 3.5.1 & 3.5.2 of the Comm. Events Center Operating Agrmnt: 7/1/16