

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

A Public Document

|   |                      |   |   |
|---|----------------------|---|---|
| <b>1. Agency Name</b>                           |                      | <b>Date Stamp</b>   | <b>California Form 802</b>                  |
| City of Ontario                                 |                      |   | For Official Use Only                       |
| Division, Department, or Region (if applicable) |                      |   | CITY CLERK'S OFFICE<br>RCVD MAY3'22 PM 1:20 |
| Designated Agency Contact (Name, Title)         |                      |   |   |
| Scott Ochoa, City Manager                       |                      | <input type="checkbox"/> <b>Amendment</b> (Must Provide Explanation in Part 3.) |   |
| Area Code/Phone Number                          | E-mail               | <b>Date of Original Filing:</b> _____   |   |
| 909-395-2000                                    | sochoa@ontarioca.gov | (month, day, year)  |   |

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes     No     Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 67.00

Event Description: Disney on Ice 3:00 p.m.    Date(s) 04 / 23 / 22

Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency?    Yes     No     If no: \_\_\_\_\_

Name of Source

Was ticket distribution made at the behest of agency official?    Yes     No     If yes: Ochoa, Scott

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  |
|---|-----------------------------|---|
|   |                             |   |
|   |                             |   |
| B. Name of Individual (Last, First)                               | Number of Ticket(s)/ Passes | Identify one of the following:  |
| Reyes, Ruben  | 5                           | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/><br><small>If checking "Ceremonial Role" or "Other" describe below:</small><br>Section 4, (n), (o) |
| Watson, Ed  | 5                           | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/><br><small>If checking "Ceremonial Role" or "Other" describe below:</small><br>Section 4, (n), (o) |
| 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

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 Aarmnt: 7/1/16

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

Agency Name

**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   |
|---|-----------------------------|--|
|   |                             |  |
|   |                             |  |
|   |                             |  |
|   |                             |  |
| B. Name of Individual (Last, First)                               | Number of Ticket(s)/ Passes | Identify one of the following:   |
|   |                             | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/><br><i>If checking "Ceremonial Role" or "Other" describe below:</i> |
| Salinas, Richard  | 4                           | Section 4, (n), (o)  |
| Saucedo, Raul   | 4                           | Section 4, (n), (o)  |
| Sanchez, Juan   | 5                           | Section 4, (n), (o)  |
| Hernandez, Richard  | 4                           | Section 4, (n), (o)  |
| 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   |
|   |                             |  |
|   |                             |  |
|   |                             |  |
|   |                             |  |

**Print** **Clear**

**Agency Report of:  
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Agency Name

**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  |
|---|-----------------------------|---|
|   |                             |   |
|   |                             |   |
|   |                             |   |
|   |                             |   |
| B. Name of Individual (Last, First)                               | Number of Ticket(s)/ Passes | Identify one of the following:  |
| Blakeney, Richard   | 5                           | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/><br><i>If checking "Ceremonial Role" or "Other" describe below:</i><br>Section 4, (n), (o) |
| Vega, Louie   | 4                           | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/><br><i>If checking "Ceremonial Role" or "Other" describe below:</i><br>Section 4, (n), (o) |
| Belmontes, Brandi   | 2                           | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/><br><i>If checking "Ceremonial Role" or "Other" describe below:</i><br>Section 4, (n), (o) |
|   |                             |   |
| 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  |
|   |                             |   |
|   |                             |   |
|   |                             |   |
|   |                             |   |

**Print** **Clear**