Agency Report of:

- J J			
Ceremonial	Role Events	and Ticket/Pass	Distributions

ΑΙ	Pu	bli	c D	OC	um	ent

1 Aganas Nam					T	AT abile becament
1. Agency Nan					Date Stamp	California 802
City of Ontario Division, Department, or Region (if applicable)						TOTAL
Division, Depa	rtment, or Reg	ion (if applicable)				For Official Use Only
Decignated Ass	anau Camtaat	/A1 T'' 1				CITY OLERK'S O
Designated Ag	-	(Name, Litle)				KU0 0011422
Scott Ochoa,					Amendment (Mus	t Provide Explanation in Part 3.)
Area Code/Pho		E-mail				
909-395-2000		sochoa@ontarioca	ı.gov		Date of Original Filing	(month, day, year)
2. Function or	Event Infor	mation				
Does the ager	ncy have a ticl	ket policy? Yes	■ No □ F	Face Value of	Each Ticket/Pass \$.	67.00
·-	-					-
Event Descrip	tion:	Provide Title/ Expla	nation [Date(s)	0822	
Ticket(s)/Pass	(es) provided			f no:		
	(10) p.07,404	ay agonoy. 105	_	A.—.	Name of Course	
Was ticket dist	tribution made	at the behest Yes	■ No □ I	f yes: Ochoa,	Scott	
of agency offi					Official's Name (Last, Firs	<i>t</i>)
. Recipients						
Use Section A to	o identify the agen	cy's department or unit.	Use Section B to i	dentify an individu	ual. Use Section C to iden	tify an outside organization.
A. Name	of Agency, Depa	rtment or Unit	Number of Ticket(s)/	Describe the	e public purpose made n	ursuant to the agency's policy
	,,		Passes	20001120 111	s pasite parpose made p	uradant to the agency's policy
				1		
В.	Name of Indi	vidual.	Number			
В.	(Last, Firs		of Ticket(s)/ Passes		Identify one of the	following:
				Cerem	onial Role Other	□ Income □
Valencia, Ru	ben		6	1	ing "Ceremonial Role" or "Other" o	
				Section 4, (f	r), (n)	
(
Escalante, N	icole		2	1	onial Role Other on the Other	_
			_	Section 4, (r		
-			Number	0000011 4, (1	11), (0)	
	me of Outside Or ude address and		of Ticket(s)/	Describe the	public purpose made pu	rsuant to the agency's policy
			Passes	ID OF THE		
Verification						
I have read and t	understand FPI	PC Regulations 18944	.1 and 18942. I	have verified th	hat the distribution set	forth above, is in accordance
with the requirem	ents/	•				addroj io ili doddiadiloc
181	W-	Scott Ochoa		City M	/lanager	10/05/22
Signature of Agen	cy Head or Designe		int Name		Title	(month, day, year)
						,
Comment: All 1	tickets provide	ed pursuant to Section	ons 3.5.1 & 3.	5.2 of the Con	nm. Events Center C	Operating Agrmnt; 7/1/16

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FPPC Form 802 (2/2016) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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. Number Name of Agency, Department or Unit A. Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ 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: Belmontes, Brandi 1 Section 4, (n), (o) Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: Mendoza, Melissa 2 Section 4, (n), (o) Other 🔲 Ceremonial Role Income If checking "Ceremonial Role" or "Other" describe below: Mena, Crisol 4 Section 4, (f), (n) Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization C. of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy (include address and description) Passes

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