Agency Report of:

Cere	emonia	al Role	Events	and	Ticket/Pass	Distribu	tions

Δ	Pu	hl	ic	Doc	um	ent
$\overline{}$	ıu	N/ I	16		инн	CIII

1.	Agency Name				Date Stamp	California 802
	City of Ontario					Form OUZ
	Division, Department, or Reg	ion (if applicable)				For Official Use Only
	Designated Agency Contact	(Name, Title)				
	Scott Ochoa, City Manager				Amendment (Must F	Provide 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				
	Does the agency have a tick	ket policy?	■ No 🗆 F	ace Value of I	Each Ticket/Pass \$	67.00
					, 12 , 22	
	Event Description: LA Clipp	Provide Title/ Expla	nation	Date(s)		
	Ticket(s)/Pass(es) provided			no:		
	() () (100	. 110	Ochoo	Name of Source	
	Was ticket distribution made	at the behest Yes	■ No 🗆 🏻 If	yes: Ochoa,	Official's Name (Last, First)	
	of agency official?				Omolai's Name (Last, First)	
_	Destatents					
3.	Recipients	avia department av unit	Llas Carrian Dán is	المنافعة المسائد المادة	ol Alex Continue Che intensit	
	Use Section A to identify the agen	cy's department or unit.	Number	T Individu	al. Use Section C to Identif	y an outside organization.
	A. Name of Agency, Depa	ertment or Unit	of Ticket(s)/	Describe the	e public purpose made pur	suant to the agency's policy
			Passes			
			Number			
	B. Name of India (Last, Firs		of Ticket(s)/ Passes		Identify one of the fe	ollowing:
	(4004)		rasses		onial Role Other	Income
	Wapner, Alan		2		onial Role Other ing "Ceremonial Role" or "Other" des	
				Section 4, (f), (n)	
	Valencia, Ruben		6		onial Role Other Other	
	valoriola, rabori			Section 4, (f	f). (n)	
			Number	, , ,	7, (-7	
	Name of Outside Or (include address and		of Ticket(s)/ Passes	Describe the	public purpose made purs	suant to the agency's policy
	0		1 43363			
						
	Varification A					
	Verification	DO D	4 40040			
	I have read and understand FPI with the requirements.	PC Regulations 18944	.1 and 18942. I	nave verified th	nat the distribution set fo	orth above, is in accordance
		- Coott Oohaa		CH. N	lanagar	14/40/00
,	Signature of Agency Head or Designe	Scott Ochoa	int Nama		Manager Title	11/10/22
	Signature of Agency riead or Designa	se Pr	int Name		raje	(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

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



Describe the public purpose made pursuant to the agency's policy Identify one of the following: Ceremonial Role Other Income Income
Identify one of the following: Ceremonial Role Other Income
Ceremonial Role Other Income
Ceremonial Role Other Income
Ceremonial Role Other Income
Ceremonial Role Other Income I
Income E
Section 4, (f), (n)
Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
Section 4, (f), (n)
Ceremonial Role Other Income
Section 4, (f), (n)
Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
Describe the public purpose made pursuant to the agency's policy

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