١.	Agency Name				Date Stamp	California OOO
	City of Ontario					Form 802
	Division, Department, or Region (if applicable)				For Official Use Only	
	Designated Agency Contact (Name, Title)				1	MING NUVL (ZZF
	Scott Ochoa, City Manager				☐ Amendment (Must Provide Explanation in Part 3.)	
	Area Code/Phone Number   E-mail			Americanient (wastriovide Explanation in Fait 5.)		
					Date of Original Filing:(month, day, year)	
	Function or Event Infor	mation				
					Each Ticket/Pass \$	67.00
	Event Description: Ontario Reign vs. San Diego Date(s)				, 22 , 22	
	Provide Title/ Explanation					
	Ticket(s)/Pass(es) provided by agency? Yes ■ No □ If no:					
	Was ticket distribution made at the behest Yes ■ No □ If yes: Ochoa,				Name of Source Scott	
	Was ticket distribution made at the behest Yes ■ No ☐ If yes: Ochoa, of agency official?				Official's Name (Last, First)	
	or agency official?					
	Recipients					
	<ul> <li>Use Section A to identify the agen</li> </ul>	cy's department or unit.	Use Section B to i	dentify an individu	ial. Use Section C to identify	an outside organization.
	A Name of Agency Dona	Number Pagariba the		nublic nurses made aurount to the arrange of		
	A. Name of Agency, Department or Unit		of Ticket(s)/ Passes	Describe the	he public purpose made pursuant to the agency's policy	
	B. Name of Individual (Last, First)		Number of Ticket(s)/ Passes		Identify one of the fol	lowing:
	Valencia, Ruben		5		onial Role Other Other ing "Ceremonial Role" or "Other" descr	Income I
	valoriola, raboti			Section 4, (f		
				Occion 4, (i	<u>,, (11)</u>	
			-			
				ı	onial Role  Other  Othe	Income Income Income
			Number	ı		
	C. Name of Outside Or (include address and		Number of Ticket(s)/ Passes	If checki		ibe below:
			of Ticket(s)/	If checki	ing "Ceremonial Role" or "Other" descr	ibe below:
			of Ticket(s)/	If checki	ing "Ceremonial Role" or "Other" descr	ibe below:

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

City Manager

Title

Signature of Agency Head or Designee

Print Name

Scott Ochoa

11/10/22

(month, day, year)