-	eremonial Role Events and Ticket/Pass Distributions				A Public Document	
1.	Agency Name				Date Stamp	California 802
	City of Ontario  Division, Department, or Region (if applicable)					For Official Use Only
	Division, Department, or Key	іоп (ії арріісаріе)		CITY CLERK'S D		
	<b>Designated Agency Contact</b>	(Name, Title)	1	ROUD JEN18728		
	Scott Ochoa, City Manager		Amandment ((4) (5)	wife First C is S (0)		
	Area Code/Phone Number		Amendment (Must Pro	ovide Explanation in Part 3.)		
	909-395-2000 sochoa@ontarioca		.gov		Date of Original Filing:(month, day, year)	
2.	Function or Event Infor	mation				
	Does the agency have a ticl	ket policy? Yes	Each Ticket/Pass \$	67.00		
	Event Description: Disney of	on Ice 3:00 p.m.	<u>, 26 , 22 </u>			
	·	Provide Title/ Expla	anation			
	Ticket(s)/Pass(es) provided by agency? Yes ■ No □ If no:				Name of Source	
	Was ticket distribution made at the behest Yes No ☐ If yes:				Scott	
	of agency official?	163	110 []	,	Official's Name (Last, First)	
<del></del> 3.	Recipients					
٥.	• 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	Number of Ticket(s)/ Describe the public purpose made pursuant to the agency's po		
	B. Name of Individual (Last, First)		Number of Ticket(s)/ Passes		Identify one of the fol	lowing:
	Valencia, Ruben		3	1	onial Role Other Other on "Other" descriptions on the control of t	Income Income
				Section 4, (f	f), (n)	
	McAlary, Helen		4		onial Role Other ing "Ceremonial Role" or "Other" descri	Income Libe below:
				Section 4, (r	n), (o)	
	C. Name of Outside Organization (include address and description)		Number of Ticket(s)/ Passes	Describe the	e public purpose made pursu	ant to the agency's policy
	Verification/					

4.	Ve	rific	ation
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I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance

Scott Ochoa

City Manager

01/12/23

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

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



Agency Name									
	Recipients								
• Use S	• 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						
2									
В.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:						
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:						
Flore	s, Daisy	6	Section 4, (n), (o)						
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:						
-			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:						
			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:						
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