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

**A Public Document** 

1. /	Agency Name				Date Stamp	California 802	
(	City of Ontario					Form OUZ	
Ē	Division, Department, or Reg	ion (if applicable)				For Official Use Only	
						CITY OLERYS DE	
Ī	Designated Agency Contact (Name, Title)					RCVD JUN1923PH	
9	Scott Ochoa, City Manager						
- 1	Area Code/Phone Number			Amendment (Must Provide Explanation in Part 3.)			
9	rea Code/Phone Number E-mail sochoa@ontarioo		a.gov		Date of Original Filing:		
						(month, day, year)	
<b>)</b> .	Function or Event Infor	mation				07.00	
	Does the agency have a ticl	_ '''	ace Value of	Each Ticket/Pass \$	67.00		
-	Event Description: RNB Rev	dition	ate(s) 05	<u>/ 14 / 23 </u>	1 1		
	Event Description: RNB Rewind-Mother's Day Edition Date(s) 05 / 14 / 23						
•	Ticket(s)/Pass(es) provided	by agency? Yes	■ No 🔲 If	no:			
,	Marie 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			yes: Ochoa,	Name of Source choa, Scott		
1	Was ticket distribution made	at the behest Yes	No 🔲 🛚	yes:	Official's Name (Last, First)		
	of agency official?						
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				,	
	A. Name of Agency, Depa	artment or Unit	of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy			
			1 43553				
	3						
			Number				
	B. Name of Individual (Last, First)		of Ticket(s)/ Passes	Identify one of the following:			
			1 10000	Coron	nonial Role Other	Income [	
	Valencia, Ruben		6	1	king "Ceremonial Role" or "Other" des	_	
	,			Section 4, (	(f), (n)		
					nonial Role O Other C	Income C	
	Escalante, Nicole		4	1	king "Ceremonial Role" or "Other" des	-	
	,			Section 4, (	(n), (o)		
	Name of Outside Organization		Number				
	C. (include address and		of Ticket(s)/ Passes	Describe th	e public purpose made pur	suant to the agency's policy	
				<del>                                     </del>			
_	Varification						
	Verification	IDO Bogulation - 40044	11 000 100 10	I house wanter 1	that the distribution of t	adh ahara is is seeme	
	have read and understand FP with the requirements.	ro Regulations 18944	. i and 18942. i	ı nave verified t	ırıat trie distribution set fo	orui above, is in accordance	
	770711	Cir. I		Manager	06/15/23		
	Scott Ochoa Signature of Agency Head or Designee Print Name						
	organise or Agency rread or Design	ree P	run Name		ride	(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

3.



Reci	pients				
		t. • Use Section B to i	dentify an individual. Use Section C to identify an outside org	anization.	
Α.	Name of Agency, Department or Unit	Number of Ticket(s)/	Describe the public purpose made pursuant to the agency's policy		
		Passes			
В.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:		
			Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below:	Income	
Nsaid	dzeka, Helen	2	Section 4, (n), (o)		
			Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below:	Income	
Scott	t, Jazmin	5	Section 4, (n)		
			Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below:	Income	
			Ceremonial Role  Other  If checking "Ceremonial Role" or "Other" describe below:	Income [	
C.	Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the ago	ency's policy	

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