1.	Agency Name				Date Stamp	California 802	
	City of Ontario						
	Division, Department, or Region (if applicable)				1	For Official Use Only	
						CITY CLERK'S	
	Designated Agency Contact	(Name, Title)		ROVD NOV9'29			
	Scott Ochoa, City Manager		Amendment (Mus	st Provide Explanation in Part 3.)			
	Area Code/Phone Number E-mail				Bata of Original Fillings		
	909-395-2000 sochoa@ontarioca.gov				Date of Original Filing: (month, day, year)		
2.	Function or Event Infor	mation				07.00	
	Does the agency have a tick	ket policy? Yes	Each Ticket/Pass \$	67.00			
	Event Description: Ringo Si	tarr and His All Starr	Band	ate(s) 09	_/ 17 _/ 23		
	Event Description.	Provide Title/ Expla	anation	vate(s)			
	Ticket(s)/Pass(es) provided by agency? Yes ■ No □ If no:				Name of Course		
	Was tisket distribution made	at the beheet was		ves. Ochoa,	Scott Official's Name (Last, First		
	Was ticket distribution made at the behest Yes No □ If yes: ————————————————————————————————————				Official's Name (Last, Firs	st)	
_	or agonoy omolar.						
3.	Recipients						
	-						
	Use Section A to identify the ager	ncy's department or unit.	• Use Section B to i	dentify an individ	ual. Use Section C to ider	ntify an outside organization.	
	-		Number of Ticket(s)/ Passes			ntify an outside organization.	
	Use Section A to identify the ager		Number of Ticket(s)/				
	Use Section A to identify the ager	artment or Unit	Number of Ticket(s)/			oursuant to the agency's policy	
	Use Section A to identify the ager Name of Agency, Depart B. Name of Ind (Last, Fire	artment or Unit	Number of Ticket(s)/ Passes Number of Ticket(s)/ Passes	Describe th	Identify one of th	e following:	
	Use Section A to identify the ager Name of Agency, Department Name of Indiana.	artment or Unit	Number of Ticket(s)/ Passes Number of Ticket(s)/	Describe the Ceren If chec	ldentify one of the nonial Role ☐ Other king "Ceremonial Role" or "Other"	e following:	
	Use Section A to identify the ager Name of Agency, Depart B. Name of Ind (Last, Fire	artment or Unit	Number of Ticket(s)/ Passes Number of Ticket(s)/ Passes	Describe th	ldentify one of the nonial Role ☐ Other king "Ceremonial Role" or "Other"	e following:	
	Name of Agency, Department Name of Ind (Last, Fir	artment or Unit	Number of Ticket(s)/ Passes Number of Ticket(s)/ Passes	Ceren If chec Section 4,	Identify one of the nonial Role Other (f), (n)	e following: Income	
	Use Section A to identify the ager Name of Agency, Depart B. Name of Ind (Last, Fire	artment or Unit	Number of Ticket(s)/ Passes Number of Ticket(s)/ Passes	Ceren If chec Section 4,	Identify one of the monial Role Other (f), (n) nonial Role Other (f), (n)	e following: Income	
	Name of Agency, Department Name of Ind (Last, Fir	artment or Unit	Number of Ticket(s)/ Passes Number of Ticket(s)/ Passes 6	Ceren If chec Section 4,	Identify one of the monial Role Other (f), (n) nonial Role Other (f), (n)	e following: Income	
	Name of Agency, Department Name of Ind (Last, Fir	vidual st)	Number of Ticket(s)/ Passes Number of Ticket(s)/ Passes	Ceren If chec Section 4, (Ceren If chec Section 4, (Identify one of the nonial Role Other king "Ceremonial Role Other king "Ceremonial Role" or "Other" (f), (n)	e following: Income	
	Name of Agency, Depart Name of Ind (Last, Fire Leon, Paul Dorst-Porada, Debra Name of Outside O	vidual st)	Number of Ticket(s)/ Passes Number of Ticket(s)/ Passes 6 Number of Ticket(s)/ Passes	Ceren If chec Section 4, (Ceren If chec Section 4, (Identify one of the nonial Role Other king "Ceremonial Role Other king "Ceremonial Role" or "Other" (f), (n)	e following: Income contact to the agency's policy Income contact to the agency's policy	

Scott Ochoa City Manager 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

with the requirements.

11/07/23

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



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.						
B. Name of Individual	Number of Ticket(s)/	Identify one of the following:				
(Last, First)	Passes	Ceremonial Role Other Income				
Wapner, Alan	2	If checking "Ceremonial Role" or "Other" describe below: Section 4, (f), (n)				
Trapiles, ruan		Ceremonial Role Other Incom				
Valencia, Ruben	6	Section 4, (f), (n)				
		Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:				
Jones, Courtney	4	Section 4, (n), (o)				
		Ceremonial Role Other Income				
Gastelum, Albert	4	Section 4, (n), (o)				
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's polic				

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



ontinuation Sheet A Public Documen							
Agency Name							
Recipients • Use Section A to identify the agency's department or unit.	cipients e 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					
B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:					
Smith, Stephanie	1	Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: Section 4, (n)					
		Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:					
Martinez, Stephanie	2	Section 4, (f), (n)					
Levin, Rick	1	Ceremonial Role Other Income Income Income If checking "Ceremonial Role" or "Other" describe below: Section 4, (n)					
		Ceremonial Role Other Income Income					
Levin, Cindy	1	Section 4, (n)					
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					
3	-						
	-						
D. C.							

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



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						
_						
В.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:			
			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:			
Hub	er, Vanessa	4	Section 4, (n)			
			Ceremonial Role Other 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			

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