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

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1.	Agency Name				Date Stamp	California 802
	City of Ontario					101111
	Division, Department, or Reg	ion (if applicable)]	For Official Use Only		
						The state of the s
	Designated Agency Contact	(Name, Title)			1	NOVU DEGG ZG
	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 ticl	ket policy? Yes I	■ No □ F	ace Value of	Each Ticket/Pass \$	67.00
	Event Description: Banda M			Date(s) 11	_/ 04 _/ 23	1 1
	Lvent bescription.	Provide Title/ Explai	nation	Jate(3)	·———	
	Ticket(s)/Pass(es) provided	by agency? Yes	■ No 🔲 I	f no:	Name of Source	
	Man tinket distribution made	at the helicet of T		f yes: Ochoa,	Scott Source	
	Was ticket distribution made of agency official?	e at the benest Yes	■ No 🔲 '	1 yes	Official's Name (Last, First)	
	or agency official?					
3.	Recipients					
	 Use Section A to identify the ager 	cy's department or unit.	Use Section B to	identify an individu	ual. Use Section C to identi	fy an outside organization.
	A. Name of Agency, Depa	artment or Unit	Number of Ticket(s)/ Passes	Describe th	ne public purpose made pu	rsuant to the agency's policy
			Fasses			
	B. Name of Indi		Number of Ticket(s)/ Passes		Identify one of the	following:
					nonial Role Other	
	Lampkin, D'Andre		4		king "Ceremonial Role" or "Other" de	escribe below:
				Section 4, ((f), (n)	
	,			1	nonial Role Other	
Sanchez, Ralph			4		king "Ceremonial Role" or "Other" de	escribe below:
				Section 4, ((a), (n)	
	C. Name of Outside O		Number of Ticket(s)/ Passes	Describe th	ne public purpose made pu	rsuant to the agency's policy
			1 2000			
	n					
4.	Verification ///					
	I have read and understand FF	PPC Regulations 18944	.1 and 18942.	I have verified	that the distribution set f	orth above, is in accordance
0	with the requirements.	Coott Oaks		Other I	Managar	40/07/00
	alve	Scott Ochoa	elut Manne	City I	Manager	12/07/23
	Signature of Agency Head or Design		rint Name		Title	(month, day, year)
	Comment: All tickets provide	led pursuant to Secti	ons 3.5.1 & 3	3.5.2 of the Co	omm. Events Center C	Operating Agrmnt; 7/1/16

FPPC Form 802 (2/2016) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

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



 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, Department or Unit	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:					
Sanchez, Ramualdo	2	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below: Section 4, (f), (n)					
		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					
	A. Name of Agency, Department or Unit B. Name of Individual (Last, First) Sanchez, Ramualdo	Name of Agency, Department or Unit Number of Ticket(s)/ Passes Number of Ticket(s)/ Passes					