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

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١.	Agency Name				Date Stamp	California Q02	
	City of Ontario			Form OUZ			
	Division, Department, or Reg	ion (if applicable)		For Official Use Only			
	Designated Assess Contact	(Name of Title)		CITY OLERIOS O			
	Designated Agency Contact	(Name, Litle)		Keve RTXZZA			
	Scott Ochoa, City Manager	IE			Amendment (Must Provide Explanation in Part 3.)		
	Area Code/Phone Number	E-mail			Data of Original Filing		
	909-395-2000	sochoa@ontarioca.	.gov		Date of Original Filing	(month, day, year)	
<u>.</u>	Function or Event Infor	mation				07.00	
	Does the agency have a tic	ket policy? Yes	■ No 🔲 F	ace Value of	Each Ticket/Pass \$ _	67.00	
	Event Description: We're Al	II In The Same Gang		(ato(s) 03	, 29 , 24		
	Lvent Description.	Provide Title/ Explai	nation	/ale(s)			
	Ticket(s)/Pass(es) provided	by agency? Yes	■ No 🔲 If	no:	Name of Source		
				ves: Ochoa,	Scott		
	Was ticket distribution made	e at the benest Yes	■ No 🔲 🖐	yes	Official's Name (Last, First	()	
	of agency official?						
3.	Recipients						
	 Use Section A to identify the ager 	ncy's department or unit. •	Use Section B to i	dentify an individu	ual. Use Section C to iden	tify an outside organization.	
	A. Name of Agency, Department	artment or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made p	ursuant to the agency's policy	
	B. Name of Ind		Number of Ticket(s)/		Identify one of the	o following:	
	(Last, Fi	rst)	Passes				
	Valencia, Ruben		6	1	nonial Role Other Other		
	valonola, rabon		ľ	Section 4, (f). (n)		
	X 			ļ			
	Belmontes, Brandi		2	1	nonial Role Other Oth		
	Dominoritos, Drana		_	Section 4, (n), (o)		
	C. Name of Outside C		Number of Ticket(s)/			ursuant to the agency's policy	
	(include address and	a description)	Passes				
	(
_	Verification /	,					
٠.	I have read and understand FF with the requirements.	PPC Regulations 18944	l.1 and 18942.	I have verified t	that the distribution set	forth above, is in accordance	
	18/1/5/	Scott Ochoa		City I	Manager	04/01/24	
	Signature of Agency Head or Design		rint Name		Title	(month, day, year)	
	Comment: All tickets provide	ded pursuant to Secti	ons 3.5.1 & 3	.5.2 of the Co	omm. Events Center	Operating Agrmnt; 7/1/16	

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.								
A.	Name of Agency, Department or Unit	Number of Ticket(s)/	Describe the public purpose made pursuant to the agency's policy						
Α.	Tallo of Agoloy, Doparation of the	Passes							
В.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:						
Mer	ndoza, Melissa	2	Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: Section 4, (n), (o)						
***************************************			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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