Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California Form City of Ontario For Official Use Only Division, Department, or Region (if applicable) CTY OLEKS OF **Designated Agency Contact (Name, Title)** ROUD MAY8'24A Scott Ochoa, City Manager Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: 909-395-2000 sochoa@ontarioca.gov (month, day, year) 2. Function or Event Information 67.00 Face Value of Each Ticket/Pass \$ _ Does the agency have a ticket policy? Yes No 🗆 Event Description: Disney on Ice 11:00 a.m. Date(s) Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes 🔳 No 🗀 Name of Source Ochoa, Scott Was ticket distribution made at the behest Yes No Official's Name (Last, First) of agency official? 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 Name of Agency, Department or Unit Describe the public purpose made pursuant to the agency's policy A. of Ticket(s)/ Passes Number Name of Individual В. Identify one of the following: of Ticket(s)/ (Last, First) **Passes** Ceremonial Role Other Income | If checking "Ceremonial Role" or "Other" describe below: 6 Feliciano, Ralph Section 4, (f), (n) Other \square Ceremonial Role Income ___ If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy C. of Ticket(s)/ (include address and description) Passes

4. Verification

I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Scott Ochoa

City Manager

05/03/24

Signature of Agency Head or Designee

Print Name

(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