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

Ceremonial Role Events and Ticket/Pass Distributions	A Public Document		
. Agency Name	Date Stamp	California 802	
City of Ontario		Form OUZ	

۱.	Agency Name				Date Stamp	Form 802
	City of Ontario					
	Division, Department, or Reg	ion (if applicable)]	For Official Use Only CITY CLERK'S
					RCVD JUN25'24	
	Designated Agency Contact (Name, Title)			1	0.000 00112.0 2.1	
	Scott Ochoa, City Manager			Amendment /Must	Provide Explanation in Part 3.)	
	Area Code/Phone Number	E-mail			Amendment (Wast	Trovide Explanation in Fait 3.,
	909-395-2000	sochoa@ontarioca.	.gov		Date of Original Filing	:(month, day, year)
2.	Function or Event Infor	mation				
	Does the agency have a tick	ket policy? Yes	■ No □ F	ace Value of	Each Ticket/Pass \$ _	67.00
	Dolomo	zo Norteno		05	<u>, 25 , 24 </u>	
	Event Description: Paiomaz	Provide Title/ Explai	nation	Date(s)	/	
	Ticket(s)/Pass(es) provided	by agency? Yes	■ No 🗆 1f	f no:		
				f yes: Ochoa,	Name of Source Scott	
	Was ticket distribution made	at the behest Yes	■ No 🗆 📑	yes:	Official's Name (Last, First,)
	of agency official?				,	
3.	Recipients					
5.	Use Section A to identify the ager	ncy's department or unit. •	Use Section B to i	dentify an individi	ual. Use Section C to ident	tify an outside organization.
	- Section 11 to Identify the eyer	The state of the s	Number		-1	
	A. Name of Agency, Depart	Name of Agency, Department or Unit of Ticket(s)/ Passes Output Describe t		the public purpose made pursuant to the agency's policy		
			1 43363	-		
			Number			
	B. Name of Individual of Ticket(s)/ (Last, First) Passes		Identify one of the following:			
				Cerer	nonial Role Other	Income
	Benitez, Armando 6		1	If checking "Ceremonial Role" or "Other" describe below:		
				Section 4, ((a), (n)	
				Ceren	nonial Role Other	Income
				1	king "Ceremonial Role" or "Other" o	
	Name of Outside O	ragnization	Number	Describe the public purpose made pursuant to the agency's policy		
	C. Name of Outside O		of Ticket(s)/ Passes	Describe tr	ie public purpose made pu	irsuant to the agency's policy
4.	Verification /					
••	I have read and understand FF	C Regulations 18944	l,1 and 18942.	I have verified	that the distribution set	forth above, is in accordance
	with the requirements.					.,
	781(1)	Scott Ochoa		City	Manager	06/19/24
	Signature of Agency Head or Design	nee P	rint Name		Title	(month, day, year)
			ana 2 F 4 9 9	E O of the O	amm Evanta Cantar	Operating Agreemts 7/1/46
	Comment: All tickets provide	ied pursuant to Secti	UIIS 3.3.T & 3	o.o.∠ or the Co	omm. Events Center	Operating Agriffic, 7/1/16