

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

**A Public Document**

<b>1. Agency Name</b>		<b>Date Stamp</b>	<b>California Form 802</b>
City of Ontario			<small>For Official Use Only</small>
<b>Division, Department, or Region</b> <i>(if applicable)</i>			<b>CITY CLERK'S OFFICE</b>
<b>Designated Agency Contact</b> <i>(Name, Title)</i>			<b>RCVD AUG5'24AM 8:52</b>
Scott Ochoa, City Manager			
<b>Area Code/Phone Number</b>	<b>E-mail</b>	<input type="checkbox"/> <b>Amendment</b> <i>(Must Provide Explanation in Part 3.)</i>	
909-395-2000	sochoa@ontarioca.gov	<b>Date of Original Filing:</b> _____ <small><i>(month, day, year)</i></small>	

**2. Function or Event Information**

Does the agency have a ticket policy?    Yes     No     Face Value of Each Ticket/Pass \$ \_\_\_\_\_ **67.00**

Event Description: Zepeda vs. Cabrera    Date(s) 07 / 06 / 24    \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
*Provide Title/ Explanation*

Ticket(s)/Pass(es) provided by agency?    Yes     No     If no: \_\_\_\_\_  
*Name of Source*

Was ticket distribution made at the behest of agency official?    Yes     No     If yes: Ochoa, Scott  
*Official's Name (Last, First)*

**3. 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)/ Passes	Describe the public purpose made pursuant to the agency's policy
B. Name of Individual <small><i>(Last, First)</i></small>	Number of Ticket(s)/ Passes	Identify one of the following:
Valenica, Ruben	4	Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small><i>If checking "Ceremonial Role" or "Other" describe below:</i></small> Section 4, (f), (n)
Sanchez, Darlene	2	Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small><i>If checking "Ceremonial Role" or "Other" describe below:</i></small> Section 4, (n), (o)
C. Name of Outside Organization <small><i>(include address and description)</i></small>	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy

**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
07/29/24

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

**Agency Report of:  
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Continuation Sheet**

Agency Name

**3. 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)/ 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:
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
Camarena, Armando	2	Section 4, (n)
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
Mesqueda, John	4	Section 4, (n)
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
Cardenas, Ben	6	Section 4, (n)
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
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

**Print Clear**