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

A	PII	hl	ic	Do	CH	m	ent

1.	Agency Name			Date Stamp	California 802		
	City of Ontario			Form OUZ For Official Use Only			
	Division, Department, or Regi	on (if applicable)		For Gridal Ose Only			
	Designated Agency Contact (Name, Title)					
	Scott Ochoa, City Manager			Amendment (Must Provide Explanation in Part 3.)			
	Area Code/Phone Number	E-mail			Amendment (wast rovide Explanation III at 5.)		
	909-395-2000	sochoa@ontarioca	.gov		Date of Original Filing:	(month, day, year)	
2.	P. Function or Event Information Does the agency have a ticket policy? Yes ⊠ No □ Face Value of Each Ticket/Pass \$ 67.00						
Event Description: Clippers of Ontario vs. Oklahoma City Date(s) 01 / 04 / 19							
Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐ If no: Name of Source							
	Was tisket distribution made	at the beheat very	en — If	ves. Ochoa,	Scott		
	Was ticket distribution made of agency official?	at the penest Yes	∆ No∐ "	y cs	Scott Official's Name (Last, First)		
3.	Recipients						
	Use Section A to identify the agence	cy's department or unit. •		dentify an individ	ual. • Use Section C to identif	y an outside organization.	
	A. Name of Agency, Depa	Number of Ticket(s)/ Passes	Describe th	e public purpose made pursu	oursuant to the agency's policy		
	B. Name of India	Number		Identify one of the following:			
	(Last, Firs	of Ticket(s)/ Passes	Identify one of the following:				
	Ochoa, Scott		_		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:		
		5 Section ²					
	Andrews, John			onial Role Other	Income [
				cking "Ceremonial Role" or "Other" describe below: O), (p)			
	C. Name of Outside Organization (include address and description)				ne public purpose made pursuant to the agency's policy		
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	4						
_	N 100 (1						
	Verification I have read and understand FPI	PC Regulations 18944	.1 and 18942. I	have verified to	hat the distribution set fort	th above, is in accordance	
			€		A.,		
			tt Ochoa int Name		City Manager	01/29/19 (month, day, year)	
				E 0 -645 - 0-			
	Comment: All tickets provide	ed pursuant to Section	ons 3.5.1 & 3.	o.∠ of the Cor	nm. Events Center Ope	erating Agrmnt; //1/16	