Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name California City of Ontario Division, Department, or Region (if applicable) PH 3: 08 Designated Agency Contact (Name, Title) CITY OF UNTARIO 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 Face Value of Each Ticket/Pass \$ 67.00 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Dierks Bentley Date(s) \_ 02 / 14 / Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? If no: \_ Yes ☑ No □ If yes: 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 A. Name of Agency, Department or Unit of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy **Passes** Number Name of Individual B. of Ticket(s)/ Identify one of the following: (Last, First) Passes Ceremonial Role Other 🔲 Income Leon, Paul If checking "Ceremonial Role" or "Other" describe below: Section 4 (I), (q) Ceremonial Role Other Income Valencia, Ruben If checking "Ceremonial Role" or "Other" describe below: 6 Section 4 (I), (q) Number Name of Outside Organization C. Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ (include address and description) Passes Section 4 (o), (p) Kevin Fugate 4 Ontario Professional Firefighters, Local 1430 P.O. Box 1326 Ontario, CA 91762

## 4. Verification

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

7500-	Scott Ochoa	City Manager	03/18/19
Signature of Agency Head or Designee	Print Name	Title	(month, day, year,

Comment: All tickets provided pursuant to Section 3.5.1 & 3.5.2 of the Comm. Events Center Operating Agrmnt; 7/1/16

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



Agency Name ty of Ontario						
Recipients  • Use Section A to identify the agency's department or unit	t. • 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)/	Identify one of the following:				
Bowman, Jim	Passes 6	Ceremonial Role Other Income Income Income Section 4 (q)				
Dorst-Porada, Debra	4	Ceremonial Role Other Income Income Section 4 (I), (q)				
Ochoa, Scott	4	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:  Section 4 (I), (q)				
Teresa Braden	2	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:  Section 4 (f), (h)				
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				
Mat Holton Chaffey Joint Union High School District	2	Section 4 (I)				
211 West Fifth Street Ontario, CA						