Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California City of Ontario For Official Use Only Division, Department, or Region (if applicable) 19 MAR 18 CITY OF DATARIO Designated Agency Contact (Name, Title) 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: Harlem Globetrotters Date(s) \_\_02\_\_/\_ 16 / 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 Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ Passes Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) **Passes** Ceremonial Role Other Income Valencia, Ruben If checking "Ceremonial Role" or "Other" describe below: 6 Section 4 (I), (q) Ceremonial Role Bowman, Jim Other 🔲 Income If checking "Ceremonial Role" or "Other" describe below: 6 Section 4 (I), (q) Number Name of Outside Organization

## C. of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy (include address and description) Passes

4. Verification

I have read and understand	FPPC Regulations 18	8944.1 and 18942	. I have verified that the	distribution set forth	above, is in accordance
with the requirements.					•
8711					

BT1 12-	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 ity of Ontario					
Reci	pients	it. • Use Section B to	identify an individual. • Use Section C to identify an outside organization.		
Α.	Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy		
:					
В.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:		
Alexa	Alexander, Georgina	4	Ceremonial Role Other Income Income Income Section 4 (f), (h)		
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:		
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:		
-			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:		
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		
<					