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

A Public Document

١.	Agency Name					Date Stamp California Q					
	City of Ontario	City of Ontario							Form OU2		
•	ivision, Department, or Region (If Applicable)					2 PM	3	28	For Official Use Only		
							•	_			
	Designated Agency Contact (										
	Al C. Boling, City Manager										
	Area Code/Phone Number   E-mail					Amendment (Must provide explanation in Part 3.)					
	909-395-2000	tarioca.gov	rioca.gov		Date of Original Filing:(Month, Day, Year)						
)	Function or Event Inforr	nation				<del>art a garante pundunta a ca</del>		(WOII	iii, Day, Teal)		
	Does the agency have a ticket	Face Value o	f Each T	icket/Pas	s \$	····	67.00				
	Event Description Disney Live!/ 4:00 p.m.										
	Event Description Disney Live!/ 4:00 p.m. Date(s) 01 / 09 / 16 / / / / / / / / / / / / / / / / /										
	Ticket(s)/Pass(es) provided by agency? Yes ⊠ No □			☐ If no:	If no:						
						Nam	e of Sou	ırce			
١	Was ticket distribution made at the behest $No \square Yes oxtimes If y$ of agency official?			☑ If yes: Boling	/es: Boling, Al C.  Official's Name (Last, First)						
- Company							vanie (L	ası, riisl			
	Recipients	'a danartmant ar	unit allas Coa	ition D to Identify on to divide		0					
•	α.		Number of		ual. • Use Section C to identify an outside organization.						
	A. Name of Agency, Department or Unit		Ticket(s)/ Pass(es)	lic purpose made pursuant to the agency's policy							
•											
•											
Ī	Name of Individual		Number of Ticket(s)/	Identify one of the following:							
-	(Last, First)	****	Pass(es)		·						
	Wapner, Alan			Ceremonial Role  If checking "Ceremoni		ther   ther' describe	helow:		Income [		
			8	Section 4 (I), (q)	The state of the december below.						
				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,							
•				Ceremonial Role	Ot	ther 🔲			Income		
			-	If checking "Ceremoni	ial Role" or "O	)ther" describe	below:				
-			Number of								
(	Name of Outside Organization (include address and description)		Ticket(s)/ Pass(es)	Ticket(s)/ Describe the pub			lic purpose made pursuant to the agency's policy				
-			1 400(00)			· I					
	Varification								With the Control of t		
	Verification have read and understand FPFORegul	ations 18944.1 an	d 18942. I have ve	rified that the distribution set fo	orth above	is in accorda	ance wit	h the rea	uirements.		
MATC			Al C. Bol	City Manager 02/02/16							
	Signature of Agency Head or Designee		Print Nam	City	Title (Month, Day, Year)						
									(, 20), (04)		

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



	ncy Name							
3. I	ity of Ontario  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.							
7	A. Name of Agency, Department or Unit	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy					
-								
Ē	3. Name of Individual (Lest, First)	Number of Ticket(s)/ Pass(es)	Identify one of the following:					
E	Bowman, Jim	4	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:  Section 4 (q)					
			Ceremonial Role  Other  Income  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:					
_	Name of Outside Organization (include address and description)	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy					
_								
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