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

1. Agency Name

A Public Document

| . Agency Name | | | Date Stamp California O O O | |
|--|-------------------------|--|--|---------------------------------|
| City of Ontario | | | The same and the | Form 802 |
| Division, Department, or Region (if applicable) | | - | | For Official Use Only |
| | | 2016 FEB 1 | 6 PM 4 58 | |
| Designated Agency Contact (Name, Title) | | | | |
| Al C. Boling, City Manager | | | | |
| Area Code/Phone Number E-mail | | Amendment (Must Provide Explanation in Part 3.) | | |
| 909-395-2000 aboling@ontarioo | a.gov | | Date of Original Filing | g: (month, day, year) |
| 2. Function or Event Information | | | | |
| Does the agency have a ticket policy? Yes | s⊠ No□ F | ace Value of I | Each Ticket/Pass \$. | 67.00 |
| Event Description: Reign vs. Condors/ Hockey | | Date(s)01/ | | |
| Provide Title/ Exp | lanation | Jale(s) | | |
| Ticket(s)/Pass(es) provided by agency? Yes | ⊠ No 🗆 I | f no: | Name of Source | |
| M 6-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1 | | r Boling | Name of Source | |
| Was ticket distribution made at the behest Yes | No □ I | f yes: Boling, / | Official's Name (Last, Firs | st) |
| of agency official? | | | | |
| 8. Recipients | | | | |
| • Use Section A to identify the agency's department or unit. | • Use Section B to | identify an individ | ual. • Use Section C to ide | entify an outside organization. |
| A. Name of Agency, Department or Unit | Number of Ticket(s)/ | Describe the public purpose made pursuant to the agency's policy | | |
| | Passes | | | |
| | | | | |
| | | ļ | | |
| | | | | |
| | Number | | | |
| B. Name of Individual (Last, First) | of Ticket(s)/ | | Identify one of the | e following: |
| | Passes | 0 | | |
| Dorst-Porada, Debra | 1 | If check | Ceremonial Role U Other U Income Income If checking "Ceremonial Role" or "Other" describe below: | |
| | ' | Section 4 (I) | | |
| Wapner, Alan | | Corom | onial Rola D | |
| wapner, Alan | 3 | If check | remonial Role Other Income Income cecking "Ceremonial Role" or "Other" describe below: | |
| | | Section 4 (I), | (q) | |
| Name of Outside Organization | Number | | | and the second of the second |
| C. (include address and description) | of Ticket(s)/ Passes | Describe the | public purpose made p | ursuant to the agency's policy |
| Law Enforcement of Ontario | _ | Section 4 (c), (h) | | |
| 2500 South Archibald Avenue | 2 | | | |
| Ontario, CA 91761 | | | | |
| | | | | |
| . Verification | | | 1 | |
| I have read and understand FPPC Regulations 1894 | 4.1 and 18942. | l have verified t | hat the distribution set | forth above, is in accordance |
| with the requirements | | | | |
| | C. Boling | | City Manager | 02/16/16 |
| Signature of Agency Head or Designee | Print Name | | Title | (month, day, year) |
| Comment: All tickets provided pursuant to Sec | tion 4.6.1 of the | e Event Cente | r Operating Agreem | nent. |