Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California City of Ontario **Form** For Official Use Only Division, Department, or Region (if applicable) 16 MAR 25 AM II: 01 OF OHTARIO Designated Agency Contact (Name, Title) CLERK/RECORDS Al C. Boling, City Manager Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: 909-395-2000 aboling@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: CIF Date(s) __02 / 27 Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ⊠ No □ If no: _ If yes: Boling, AI C. 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 Name of Agency, Department or Unit A. of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy **Passes** Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) **Passes** Ceremonial Role Other Income Bowman, Jim If checking "Ceremonial Role" or "Other" describe below 8 Section 4 (q) Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: 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 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements. Al C. Boling City Manager 03/22/16 (month, day, year) Comment: All tickets provided pursuant to Section 4.6.1 of the Event Center Operating Agreement.

Agency Report of: