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

A Public Document

1.	Agency Name				Date Stamp	California O O O	
	City of Ontario					Form 802	
	Division, Department, or Region (if applicable)				1	For Official Use Only	
	2016 APR 18				AM 10 22		
	Designated Agency Contact (Name, Title)						
	Al C. Boling, City Manager				Amondment (Must 6	Dravide Fundamenting in Florida	
	Area Code/Phone Number	lumber E-mail			Amendment (Must Provide Explanation in Part 3.)		
	909-395-2000	aboling@ontarioca	.gov		Date of Original Filing:	(month, day, year)	
2.	Function or Event Information						
	Does the agency have a ticket policy? Yes⊠ No ☐ Face Value of Each Ticket/Pass \$ 67.00						
	Event Description: Reign vs. Gulls/ Hockey Game Date(s) 03 / 12 / 16						
	Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ⊠ No □ If no:						
	Was ticket distribution made at the behest Yes ⊠ No ☐ If yes: Boling, Al C. Official's Name (Last, First)						
	of agency official?						
3.	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.						
	A. Name of Agency, Department or Unit		Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy			
			rasses	g displication is the balance			
	B. Name of Individual (Last, First)		Number of Ticket(s)/ Passes		Identify one of the following:		
	Antillon, Cindy		3	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:			
			J	Section 4 (o	o), (p)		
	Extension of the Control of the Cont			Ceren	nonial Role Other	Income 🗌	
		:		If chec	king "Ceremonial Role" or "Other" de	scribe below:	
		Number					
	C. Name of Outside Organization (include address and description)		of Ticket(s)/ Describe the Passes		ne public purpose made pursuant to the agency's policy		
	meunication (1912)						
-					**************************************		
1.	/erification						
	I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in activity with the requirements.					orth above, is in accordance	
	MA	Polina		City NA	04/40/40		
	Signature of Agency Head or Designation	C. Boling		City Manager	04/13/16 (month, day, year)		
				. .		, , ,	
	Comment: All tickets provide	ed pursuant to Section	on 4.6.1 of the	e Event Cente	er Operating Agreeme	nt.	