Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California City of Ontario Form Division, Department, or Region (if applicable) For Official Use Only aaig ogt Designated Agency Contact (Name, Title) 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: Belong Tour Date(s) __09__/ Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? If no: _ Yes ☑ No □ Name of Source If yes: Boling, Al C. 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 Α. Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ **Passes** Number В. Name of Individual of Ticket(s)/ Identify one of the following: (Last, First) Passes Ceremonial Role Other Π Lowe, Christine Income If checking "Ceremonial Role" or "Other" describe below: 2 Section 4 (o), (p) Ceremonial Role Other ___ Income | If checking "Ceremonial Role" or "Other" describe below. Number Name of Outside Organization C. Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ (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.

METO	Al C. Boling	City Manager	10/03/16
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.