-	gency Report of: eremonial Role Even	ts and Tick	et/Pa	ass Dist	ributions	AP	ublic Document	
1.	Agency Name					Date Stamp	0.00	
	City of Ontario						Form OUZ	
	Division, Department, or Region (if applicable)					6 NOV -2 AM 10: 24	For Official Use Only	
						CITY OF ONTARIO		
	Designated Agency Contact (Name, Title)					CITY OF OMTARIO TY CLERK/RECORDS		
	Al C. Boling, City Manager					Amendment (Must Provi	de Explanation in Part 3.)	
	Area Code/Phone Number E-mail							
	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			No□	Face Value of	Each Ticket/Pass \$ <u>67.0</u>	0	
	Event Description: WWE Live				Date(s) 10 / 02 / 16			
	Provide Title/ Explanation							
	Ticket(s)/Pass(es) provided	by agency?	Yes 🛚	No□	If no:	Name of Source		
	Was ticket distribution made at the behest Yes ☒ No ☐ If				If yes: Boling,	AI C.		
	of agency official?					Official's Name (Last, First)		
	Use Section A to identify the agen Name of Agency, Department		ınit. • U	Number of Ticket(s) Passes		ual. • Use Section C to identify a		
			- 1					
	B. Name of Indi			Number of Ticket(s)	,	Identify one of the follo	wing:	
	B. Name of Indi (Last, Fir							
				of Ticket(s)	Ceren	nonial Role Other Other king "Ceremonial Role" or "Other" describ.	Income [
	(Last, Fir			of Ticket(s)	Ceren If check Section 4 (q	nonial Role Other Other king "Ceremonial Role" or "Other" describ.	Income L	
	(Last, Fire	rganization		of Ticket(s), Passes	Section 4 (q Ceren If check Section 4 (q)	nonial Role Other or "Other" describe	Income Income le below:	
	Bowman, Jim Willoughby, Jim Name of Outside O	rganization		of Ticket(s), Passes 5 Number of Ticket(s),	Section 4 (q Ceren If check Section 4 (q)	nonial Role Other or "Other" describe) nonial Role Other" describe) nonial Role Other king "Ceremonial Role" or "Other" describe	Income Le below:	
4.	Bowman, Jim Willoughby, Jim C. Name of Outside O (include address and	rganization I description)	18944	of Ticket(s), Passes 5 Number of Ticket(s), Passes	Cerem If check Section 4 (I) Cerem Section 4 (I) Describe th	nonial Role Other or "Other" describe control of the other o	Income In	
4.	Bowman, Jim Willoughby, Jim C. Name of Outside O (include address and	rganization I description)	18944.	of Ticket(s), Passes 5 Number of Ticket(s), Passes	Cerem If check Section 4 (I) Cerem Section 4 (I) Describe th	nonial Role Other or "Other" describe control of the other o	Income In	
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Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions Continuation Sheet



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.							
A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy					
B. Name of Individual	Number						
(Last, First)	of Ticket(s)/ Passes	Identify one of the following:					
Williams, Janice	4	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below: Section 4 (f), (h)					
		Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:					
		Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:					
		Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:					
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy					