,	gency Report of: eremonial Role Even			A F	Public Document				
1.	Agency Name City of Ontario Division, Department, or Region (if applicable)				Date Stamp			California 802 Form Solution For Official Use Only	
		gnated Agency Contact (Name, Title)			NOV 17	PM 5	20		
	Al C. Boling, City Manager Area Code/Phone Number				Amendment (Must Provide Explanation in Part 3.)				
	909-395-2000	aboling@ontarioca	.gov		Date of O	riginal Filir	(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							00	
					04	17	_		
	Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐ If no:								
	Was ticket distribution made of agency official?	ĭ No□ I	Name of Source If yes: Boling, Al C. Official's Name (Last, First)						
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, Depa	Number of Ticket(s)/ Passes	Describe th	Describe the public purpose made pursuant to the agency's policy					
	B. Name of Indi		Number of Ticket(s)/		ldent	ify one of th	ne foll	owing:	
	Valencia, Ruben	Passes 6	If check	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:					
	Griego, Andrew		4	If check	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below: Section 4, (h), (p)				
	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					
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4.	Verification I have read and understand FP with the requirements.	PC Regulations 18944.	.1 and 18942.	I have verified t	that the dist	ribution se	et forti	h above, is in accordance	
			Boling		City Manager			11/17/17 (month, day, year)	
	Comment: All tickets provid	ed pursuant to Section	ons 3.5.1 & 3	.5.2 of the Co	mm. Even	ts Center	Оре	rating Agrmnt; 7/1/16	