Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document Date Slamp 1. Agency Name California **Form** City of Ontario AM 11:21 For Official Use Only Division, Department, or Region (if applicable) Designated Agency Contact (Name, Title) CITY CL Scott Ochoa, City Manager Amendment (Must Provide Explanation in Part 3.) **Area Code/Phone Number** E-mail Date of Original Filing: 909-395-2000 sochoa@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: Cirque Du Soleil Crystal 03 17 Date(s) _ Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? If no: _ Yes 🛛 No 🗌 Name of Source If yes: Ochoa, Scott 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 Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ A. Passes Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) Passes Ceremonial Role Other \square Income \square Valencia, Ruben If checking "Ceremonial Role" or "Other" describe below: 6 Section 4, (I), (q) Ceremonial Role Other Income Antillon, Cindy If checking "Ceremonial Role" or "Other" describe below: 4 Section 4, (o), (p) Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy C. of Ticket(s)/ (include address and description) **Passes** 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. Scott Ochoa City Manager 04/22/19 Print Name mature of Agency Head or Designee (month, day, year)

Comment: All tickets provided pursuant to Sections 3.5.1 & 3.5.2 of the Comm. Events Center Operating Agrmnt; 7/1/16

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

3.



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Reci	pients		
A.	Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	identify an individual. • Use Section C to identify an outside organization. Describe the public purpose made pursuant to the agency's policy
		Fabes	
В.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Escal	ante, Nicole	3	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below: Section 4, (o), (p)
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
8			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:
			Ceremonial Role Other Income 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
7			
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