

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

**A Public Document**

|  |                                |   |   |
|--|--------------------------------|---|---|
| <b>1. Agency Name</b><br>City of Ontario                             |                                | Date Stamp<br><b>RECEIVED</b><br>19 MAY 15 AM 9:04<br>CITY OF ONTARIO<br>CITY CLERK/RECORDS | <b>California Form 802</b><br>For Official Use Only |
| Division, Department, or Region (if applicable)                      |                                |   |   |
| Designated Agency Contact (Name, Title)<br>Scott Ochoa, City Manager |                                | <input type="checkbox"/> Amendment (Must Provide Explanation in Part 3.)                    |   |
| Area Code/Phone Number<br>909-395-2000                               | E-mail<br>sochoa@ontarioca.gov | Date of Original Filing: _____<br>(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: Chayanne Desde El Alma Tour 2019 Date(s) 04 / 13 / 19  
Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency? Yes  No  If no: \_\_\_\_\_  
Name of Source

Was ticket distribution made at the behest of agency official? Yes  No  If yes: Ochoa, Scott  
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, Department or Unit                             | Number of Ticket(s)/ Passes | Describe the public purpose made pursuant to the agency's policy  |
|---|-----------------------------|---|
|   |                             |   |
|   |                             |   |
| B. Name of Individual (Last, First)                               | Number of Ticket(s)/ Passes | Identify one of the following:  |
| Valencia, Ruben   | 6                           | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/><br><small>If checking "Ceremonial Role" or "Other" describe below:</small><br>Section 4, (l), (q) |
|   |                             | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/><br><small>If checking "Ceremonial Role" or "Other" describe below:</small>                        |
| 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  |
|   |                             |   |
|   |                             |   |

**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.*

Scott Ochoa
City Manager
05/14/19  
Signature of Agency Head or Designee
Print Name
Title
(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