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

A	m.	احال	18 -	D -			
A	۲l	מנ	HC.	DC	CL	ım	ent

1.	Agency Name City of Ontario				R	E C EPHYSEID	California 802
	Division, Department, or Regi	on (if applicable)	_		- 40		For Official Use Only
	Division, Department, or Neg	ion (ii applicable)			19 J	UL 26 PM 3: 25	
	Designated Agency Contact (Name, Title)			CIT	Y OF ONTARIO	
	Scott Ochoa, City Manager				CITY	CLERK/RECORDS Amendment (Must Pri	ovido Evolonation in Part 3 l
	Area Code/Phone Number	E-mail				Amendment (wast Pro	очие Ехріапаціоп іп Рап з.)
	909-395-2000	sochoa@onta	rioca.g	jov		Date of Original Filing: _	(month, day, year)
_ 2.	Function or Event Infor	mation					
	Does the agency have a tick	ket policy?	Yes 🛚	l No □ F	Face Value of	Each Ticket/Pass \$ 67	.00
	Event Description: King of th						
	Event Description:	Provide Title	/ Explana		Jate(s)	/	
	Ticket(s)/Pass(es) provided	by agency?	Yes 🗵	No □ I	f no:	Name of Source	
					. Ochoa	Name of Source	
	Was ticket distribution made	at the behest	Yes 🛚	No 🗆 📑	f yes: Ochoa,	Official's Name (Last, First)	
	of agency official?						
3.	Recipients • Use Section A to identify the agen-	cy's department or u	ınit. • U	se Section B to	identify an individ	ual. • Use Section C to identi	fy an outside organization.
	A. Name of Agency, Depa	rtment or Unit		Number of Ticket(s)/ Passes	Describe th	e public purpose made purs	uant to the agency's policy
	B. Name of Indi			Number of Ticket(s)/ Passes		Identify one of the fo	llowing:
	Leon, Paul			6		nonial Role Other or "Other" desc ing "Ceremonial Role" or "Other" desc), (q)	Income Income
	Valencia, Ruben			6	1	nonial Role Other or "Other" description, (q)	Income Income
	C. Name of Outside Or (include address and			Number of Ticket(s)/ Passes	Describe th	e public purpose made purs	uant to the agency's policy
4.	Verification I have read and understand FPI with the requirements.	PC Regulations 1	18944.1	and 18942.	I have verified t	hat the distribution set for	th above, is in accordance
FLAI!			Scott	ott Ochoa		City Manager 07/2	
	Signature of Agency Head or Designation	ee —		t Name		Title	07/22/19 (month, day, year)
	All tickets provide				.5.2 of the Co	mm. Events Center Op	erating Agrmnt; 7/1/16
	Comment: All tickets provide					<u>.</u>	

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



gency Name						
Recipients • Use Section A to		it. • Use Section B to	identify an individual. • Use Section C to identify an outside organization.			
-	of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy			
			±1			
В.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:			
Ochoa, Scott	Ochoa, Scott		Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: Section 4, (I), (q)			
			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:			
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:			
C. Na	ame of Outside Organization lude address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy			
ı6						
7-						
N-						