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

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1.	Agency Name				Date Stamp	California OOO	
	City of Ontario					Form OUZ	
	Division, Department, or Reg	ion (if applicable)				For Official Use Only	
	Designated Agency Contact	esignated Agency Contact (Name, Title)				GITY CLERK'S OFFITE ROVD APRO12222	
	Scott Ochoa, City Manager					A MINE SERVICE SERVICE SERVICE	
	Area Code/Phone Number	E-mail			Amendment (Must F	Provide Explanation in Part 3.)	
	909-395-2000	sochoa@ontarioca	I GOV		Date of Original Filing:		
		- Contraction			Date of Original Filing:	(month, day, year)	
2.	Function or Event Infor	mation					
	Does the agency have a tick	ket policy? Yes	■ No □ F	ace Value of I	Each Ticket/Pass \$	67.00	
	Event Description: Ontario				, 16 , 22		
	Event Description.	Provide Title/ Expla	nation L	Date(s)			
	Ticket(s)/Pass(es) provided			f no:			
					-		
	Was ticket distribution made	at the behest Yes	■ No 🗆 🖽	f yes: Ochoa,	Official's Name (Last, First)		
	of agency official?				Omolars Name (Last, Prist)		
_	Decinients						
٥.	Recipients	anda damantus ant annusit	Han Continue Basel	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			
	- Ose Section A to identify the agen	ction A to identify the agency's department or unit. • Use Section B to identify				y an outside organization.	
A. Name of Agency, Department or Unit			Number of Ticket(s)/ Describe the		e public purpose made pursuant to the agency's policy		
			Passes				
			Number				
	B. Name of India		Number of Ticket(s)/		Identify one of the fo	ollowing:	
	(Last, Firs	.,	Passes				
	Valencia, Ruben			1	onial Role Other Other on "Other Other Other" des		
	Valencia, Nubeli		2			cribe below.	
				Section 4, (f), (^[1]		
	Canabas Damalda			1	onial Role Other O	Income	
	Sanchez, Romaldo		2		ng "Ceremonial Role" or "Other" des	CRIDE DEIOW:	
	(Section 4, (f	'), (n)		
	C. Name of Outside Organization (include address and description)		Number of Ticket(s)/ Describe the		public purpose made pursuant to the agency's policy		
	(include address and	uescription)	Passes				
_							
. '	Verification /						
i	have read and understand FPF	PC Regulations 18944.	1 and 18942. I	have verified th	at the distribution set for	rth above, is in accordance	
1	with the requirements.						
	DIW	Scott Ochoa		City M	lanager	04/18/22	
	Signature of Agency Head or Designe	e Pri	int Name		Title	(month, day, year)	
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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.



ients tion A to identify the agency's department or un		
tion A to identify the agency's department or un		
		dentify an individual. Use Section C to identify an outside organization.
Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
		Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:
Andrew	2	Section 4, (f), (n)
		Ceremonial Role Other Income 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:
Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy
	(Last, First) Andrew Name of Outside Organization	Name of Outside Organization Name of Outside Organization (include address and description) Number of Ticket(s)/

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