

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

A Public Document

<b>1. Agency Name</b> City of Ontario		Date Stamp	<b>California Form 802</b>
Division, Department, or Region (if applicable)			For Official Use Only
Designated Agency Contact (Name, Title) Scott Ochoa, City Manager			CITY CLERK'S OFFICE RCVD APR21'22PM3:20
Area Code/Phone Number 909-395-2000	E-mail sochoa@ontarioca.gov	<input type="checkbox"/> <b>Amendment</b> (Must Provide Explanation in Part 3.) Date of Original Filing: _____ <small>(month, day, year)</small>	

## 2. Function or Event Information

Does the agency have a ticket policy?    Yes     No     Face Value of Each Ticket/Pass \$ \_\_\_\_\_ 67.00

Event Description: AC Clippers vs Austin    Date(s) 03 / 23 / 22    \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
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:
Wapner, Alan	2	Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Section 4, (f), (n)
Dorst-Porada, Debra	4	Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> Section 4, (f), (n)
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	04/18/22
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 Aarmnt: 7/1/16+

Print
Clear