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

A Public Document

1.	Agency Name				Date Stamp	California 802		
	City of Ontario					TOTAL		
	Division, Department, or Reg	ion (if applicable)			1	For Official Use Only		
						COULTS OF		
	Designated Agency Contact (Name, Title)					ROWD OGT2124		
	Scott Ochoa, City Manager				Amendment (Must Provide Explanation in Part 3.)			
	Area Code/Phone Number E-mail				Americanem (wast rivide Explanation in rait 3.)			
	909-395-2000	sochoa@ontarioca.	gov		Date of Original Filing:	(month, day, year)		
_	Franction on Frant Info	n otion				(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
2.	Function or Event Infor		Fack Tielrot/Dage &	67.00				
	Does the agency have a ticl			Each Ticket/Pass \$				
	Event Description: Chayani	ne	<u>, 08 , 24 </u>					
	Provide Title/ Explanation							
	Ticket(s)/Pass(es) provided by agency? Yes ■ No □ If no:							
	Was ticket distribution made	at the behest Yes	Scott					
	of agency official?	163	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, Depart	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:			
				Ceren	nonial Role Other	Income		
	Valencia, Ruben		6		king "Ceremonial Role" or "Other" de	scribe below:		
				Section 4, (f), (n)				
	Duran, Ruben		4	If chec	eremonial Role Other Income checking "Ceremonial Role" or "Other" describe below:			
				Section 4,	(n)			
	C. Name of Outside Organization (include address and description)		Number of Ticket(s)/ Passes	Describe th	Describe the public purpose made pursuant to the agency's policy			
_	Λ							
4.	Verification		, , ,			and the state of		
	I have read and understand FF	PPC Regulations 18944	.1 and 18942.	I have verified	that the distribution set f	orth above, is in accordance		
	with the requirements.	Scott Ochoa		City	Manager	10/15/24		
	Signature of Agency Head or Design	nee Pr	int 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: 7/1/163

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



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.							
• Use Sec	ction A to identify the agency's department or unit.	Number					
Α.	Name of Agency, Department or Unit	of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy				
В.	Name of Individual	Number of Ticket(s)/	Identify one of the following:				
	(Last, First)	Passes	Ceremonial Role Other Income				
			If checking "Ceremonial Role" or "Other" describe below:				
Lafar	ga, Aurelia	4	Section 4, (n)				
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:				
			Ceremonial Role Other Income Income Income If checking "Ceremonial Role" or "Other" describe below:				
			Ceremonial Role Other Income 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				
_							

Print

Clear