

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

A Public Document

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|--|---------------------------------|--|---|
| 1. Agency Name City of Ontario | | Date Stamp | California Form 802 |
| Division, Department, or Region <i>(if applicable)</i> | | 2016 JUN 24 AM 11 54 | For Official Use Only |
| Designated Agency Contact <i>(Name, Title)</i> Al C. Boling, City Manager | | | <input type="checkbox"/> Amendment <i>(Must Provide Explanation in Part 3.)</i> |
| Area Code/Phone Number 909-395-2000 | E-mail aboling@ontarioca.gov | Date of Original Filing: _____ <small><i>(month, day, year)</i></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: Reign Cup Playoffs/ Hockey Game Date(s) 05 / 22 / 16

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: Boling, Al C.
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 <small><i>(Last, First)</i></small> | Number of Ticket(s)/ Passes | Identify one of the following: |
| Dorst-Porada, Debra | 6 | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small><i>If checking "Ceremonial Role" or "Other" describe below:</i></small> Section 4 (q) |
| | | Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small><i>If checking "Ceremonial Role" or "Other" describe below:</i></small> |
| C. Name of Outside Organization <small><i>(include address and description)</i></small> | Number of Ticket(s)/ Passes | Describe the public purpose made pursuant to the agency's policy |
| | | |
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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.

| | | | |
|---|---------------------------|----------------------|--|
|  | Al C. Boling | City Manager | 06/24/16 |
| <small>Signature of Agency Head or Designee</small> | <small>Print Name</small> | <small>Title</small> | <small><i>(month, day, year)</i></small> |

Comment: All tickets provided pursuant to Section 4.6.1 of the Event Center Operating Agreement.