	gency Report of: eremonial Role Even	ts and Ticket/P	ass Distr	ibutions		Public Document
١.	Agency Name				Date Stamp	California 802
	City of Ontario	Y		Entre Stamp	Form OUZ	
	Division, Department, or Reg				For Official Use Only	
	Designated Agency Contact (
	Scott Ochoa, City Manager				Amendment (Must P.	rovide Explanation in Part 3.)
	Area Code/Phone Number			Amendment (Musi Flovide Explanation in Fait 5.)		
	909-395-2000	sochoa@ontarioca	.gov		Date of Original Filing:	(month, day, year)
2.	unction or Event Information					7.00
	Does the agency have a ticket policy? Yes $oxtimes$ No $oxtimes$ Face Value of Each Ticket/Pass \$ $rac{67.00}{}$					
	Event Description: Ontario Reign vs. Bakersfield Condors Provide Title/ Explanation Date(s) 01 /_				<u>, 20 , 20</u>	
	Ticket(s)/Pass(es) provided by agency? Yes ☑ No ☐ If no:				Name of Source	
	Ochoo					
	Vas ticket distribution made at the behest Yes ⊠ No ☐ If yes: Official's Name (Last, First) of agency official?					
3.	Pecipients • Use Section A to identify the agent A. Name of Agency, Depa	Use Section B to a Number of Ticket(s)/ Passes		fy an individual. • Use Section C to identify an outside organization. Describe the public purpose made pursuant to the agency's policy		
	B. Name of Individual		Number of Ticket(s)/		Identify one of the following:	
	(Last, First)		Passes			
	Valencia, Ruben		6	If check	Ceremonial Role Other Income I	
				1	Ceremonial Role Other 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	e public purpose made pursuant to the agency's policy	
		2				
	Verification	/				
•	I have read and understand FPI with the requirements	PC Regulations 18944	.1 and 18942.	l have verified t	hat the distribution set fo	rth above, is in accordance
	SIIX	Sco	tt Ochoa		City Manager	02/18/20

Print Name

Comment: All tickets provided pursuant to Sections 3.5.1 & 3.5.2 of the Comm. Events Center Operating Agrmnt; 7/1/16

Signature of Agency Head or Designee

FPPC Form 802 (2/2016) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

(month, day, year)

Title