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

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	Agency Name			Date Stamp	California 802	
City of Ontario						Form OUZ
	Division, Department, or Reg	ion (if applicable)			1	For Official Use Only
						CITY CLERK'S D
	Designated Agency Contact	(Name, Title)			1	ROVD APRI/24
	Scott Ochoa, City Manager					
	Area Code/Phone Number	TE-mail			Amendment (Must	Provide Explanation in Part 3.)
			701		Date of Original Filing	
	909-395-2000	sochoa@ontarioca.	.gov		Date of Original Filling	(month, day, year)
_	Function or Event Infor	mation				
-	Does the agency have a tic		■ N. D. E	ace Value of	Each Ticket/Pass \$ _	67.00
	Event Description: Harlem	Jobetrotters 2024 W	oria Four	oate(s)	<u>, 19 , 24 </u>	
		Provide Title/ Explai	nation			
	Ticket(s)/Pass(es) provided	by agency? Yes	No 🔲 🏻 If	no:	Name of Source	
				yes: Ochoa,	Scott	
	Was ticket distribution made	at the benest Yes	■ No 🗆 "	yes	Official's Name (Last, First)
	of agency official?					
_	D. Marianto					
	Recipients		Han Caretten Design		uni - Alan Cantinu Cha idam	#1£
	Use Section A to identify the ager	ncy's department or unit.		entiry an individu	ual. Use Section C to iden	tily an outside organization.
	A. Name of Agency, Depart	artment or Unit	Number of Ticket(s)/	Describe th	ne public purpose made pu	ursuant to the agency's policy
	A:		Passes			
	-					

			Number	_		
	B. Name of Ind		of Ticket(s)/		Identify one of the	following:
	(Last, Fil	St)	Passes			
	0		1	1	nonial Role Other Other Other	
	Soria, Fernando		1	1		describe below.
				Section 4, (n) 	
				Cerem	nonial Role 🔲 Other	Income
	Soria, Curtis		1	If check	king "Ceremonial Role" or "Other" o	describe below:
				Section 4, ((n)	
			Number	-		
	C. Name of Outside O		of Ticket(s)/	Describe th	ne public purpose made pu	ursuant to the agency's policy
			Passes			
		2				
_	Verification)				
	I have read and understand FF	DDC Poquiotions 19044	1 1 and 19042	I have verified	that the distribution set	forth ahove is in accordance
	with the requirements.	ro Regulations 18944	. i aliu 16942.	i nave veniled	นาลเ นาษ นารเกมนแบก Set	TOTAL ADOVE, IS IT ACCORDANCE
		Coatt Oaks		City	Managar	03/28/24
		Scott Ochoa		City i	Manager	
	Signature of Agency Head or Design	nee P	rint Name		Title	(month, day, year)
	Commont. All tickets provide	ded pursuant to Secti	ons 3.5.1 & 3	.5.2 of the Co	mm. Events Center	Operating Agrmnt; 7/1/16

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



gency I	Name						
	pients ection A to identify the agency's department or un	nit. •Use Section B to ic	Use Section B to identify an individual. Use Section C to identify an outside organization.				
Α.	Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy				
В.	Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:				
	(aud) i i d)	F 43363	Ceremonial Role Other Income				
Soria	Soria, Jackson	1	Section 4, (n)				
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:				
Torre	es, Reina	1	Section 4, (n)				
			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:				
			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:				
<u></u>	Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's policy				

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