Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions				노 축 # : -	A Public	Document
1. Agency Name	TICKEUT	433 DISTI	ibutions	Befortamp.	Califor	
City of Ontario				Lil Lil	Forr	
Division, Department, or Region (if applicable)				50	For O	fficial Use Only
and the second of the second o				S C C C C C C C C C C C C C C C C C C C		
Designated Agency Contact (Name, Title	·)			- ~ OK		
Scott Ochoa, City Manager				Amondment (4	Avet Bravida Evalens	elian in Dark 3)
Area Code/Phone Number E-mail	rea Code/Phone Number E-mail			Amendment (Must Provide Explanation in Part 3.)		
909-395-2000 sochoa	sochoa@ontarioca.gov			Date of Original Filing:(month, day, year)		
2. Function or Event Information						
Does the agency have a ticket policy	? Yes [⊠ No□ F	ace Value of	Each Ticket/Pass	\$ 67.00	
Event Description: LFL Playoffs			Data(s) 08	<u>, 24 , 19</u>	,	,
Pro-	ovide Title/ Explai	nation			/	
Ticket(s)/Pass(es) provided by agen	cy? Yes	⊠ No 🗆 📑	f no:	Name of Source		
Was ticket distribution made at the behest Yes ☒ No ☐ If yes: Ochoa,						
of agency official?	enest Yes	☑ Noll '	. y 03.	Official's Name (Last, I	First)	
3. RecipientsUse Section A to identify the agency's departs	nent or unit. •	Use Section B to	identify an individ	lual. • Use Section C to	identify an outside	organization.
A. Name of Agency, Department or	Jnit	Number of Ticket(s)/ Passes	Describe th	ne public purpose made	e pursuant to the a	agency's policy
		Number				
B. Name of Individual (Last, First)		of Ticket(s)/ Passes		Identify one of the following:		
Valencia, Ruben		6	Ceremonial Role Other Income Income It checking "Ceremonial Role" or "Other" describe below: Section 4, (I), (q)			
				nonial Role Oth king "Ceremonial Role" or "Oth	ner describe below:	Income _
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		
4. Verification				W-14- P. L	-16-11-1	
I have read and understand FPPC Regu with the requirements	ations 18944	.ī and 18942.	ı nave verified i	tnat the distribution s	set torth above, i	s in accordance
		ott Ochoa		City Manager		09/23/19
Signature of Agency Head or Designee	Pi	rint 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; 7/1/16