	gency Report of: eremonial Role Even	ts and Ticket/F	Pass Distr	ibutions	Total	AP	Public Document		
	Agency Name City of Ontario				Date Stamp	j	California 802 Form Sorm		
	Division, Department, or Region (if applicable) Designated Agency Contact (Name, Title)				COLTY CL		For Official Use Only		
	Scott Ochoa, City Manager								
	Area Code/Phone Number	E-mail			Amendment (M	ust Prov	ride Explanation in Part 3.)		
	909-395-2000	a.gov		Date of Original Filing:(month, day, year)					
2.	Function or Event Information								
	Does the agency have a tick			ace Value of I	Each Ticket/Pass \$	§ 67.0	00		
	Event Description: Hot Whe	, 07 , 19	_						
	Ticket(s)/Pass(es) provided	Provide Title/ Explain by agency? Yes		f no:	Name of Source				
	Was ticket distribution made of agency official?	at the behest Yes		f yes: Ochoa,	Scott Official's Name (Last, F	irst)	<u>_</u>		
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, Depa	Number of Ticket(s)/ Passes	Describe the	escribe the public purpose made pursuant to the agency's policy					
	B. Name of Indi		Number of Ticket(s)/ Passes		Identify one of t	the folic	owing:		
	Leon, Paul	12	If check	Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below: Section 4, (I), (q)					
	Valencia, Ruben	. 6	I .	eremonial Role Other Income checking "Ceremonial Role" or "Other" describe below: (I), (q)					
	Name of Outside Or (include address and	Number of Ticket(s)/ Passes	Describe the	e public purpose made pursuant to the agency's policy					
	James Hammond - OMSD 950 W. D St., Ontario, CA		7	Section 4, (h), (I)				
					9				
١.	Verification I have read and understand FP with the requirements.	PC Regulations 18944	.1 and 18942.	l have verified t	hat the distribution se	et forth	above, is in accordance		
			Scott Ochoa Print Name				10/09/19 (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								

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



Agency	Name									
ty of On										
	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.									
Α.			Describe the public purpose made pursuant to the agency's policy							
В. —	(Last, First)		Identify one of the following:							
McBii	ИсВird, Betty		Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below: Section 4, (h), (l)							
			Ceremonial Role Other Income Income If checking "Ceremonial Role" or "Other" describe below:							
-			Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below:							
			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 public purpose made pursuant to the agency's policy							
8										