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

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California Form 802

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CITY OF ONTARIO
CITY CLERK/RECORDS

1. Agency Name

City of Ontario

Division, Department, or Region *(If Applicable)*

Designated Agency Contact *(Name, Title)*

Chris Hughes, City Manager

Area Code/Phone Number	E-mail
909-395-2000	chughes@ci.ontario.ca.us

☐ **Amendment** *(Must provide explanation in Part 3.)*

Date of Original Filing: _____ *(Month, Day, Year)*

2. Function or Event Information

Does the agency have a ticket policy? Yes ☒ No ☐

Face Value of Each Ticket/Pass $ 67.00

Event Description TNA Wrestling *Provide Title/Explanation*

Date(s) 05 / 04 / 12 ___/___/___

Ticket(s)/Pass(es) provided by agency? Yes ☒ No ☐

If no: _____ *Name of Source*

Was ticket distribution made at the behest of agency official? No ☐ Yes ☒

If yes: Hughes, Chris *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)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Pass(es)	Identify one of the following:
Wapner, Alan	5	Ceremonial Role ☐ Other ☒ Income ☐ *If checking "Ceremonial Role" or "Other" describe below* Policy Section 4 (l), (p), (q)
		Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:*

C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Pass(es)	Describe the public purpose made pursuant to the agency's policy

4.

[redacted]

s 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance with the requirements.

Chris Hughes	City Manager	05/14/12
Print Name	*Title*	*(Month, Day, Year)*

Comment: All tickets provided pursuant to Section 4.6.1 of the AEG event center operating agreement.