

**Agency Report of:  
Ceremonial Role Events and  
Ticket/Admission Distributions**

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**A Public Document**

<b>1. Agency Name</b> City of Ontario Division, Department, or Region (if applicable)  Street Address 303 East B Street, Ontario, CA 91764 Designated Agency Contact (Name, Title) Chris Hughes, City Manager Area Code/Phone Number      E-mail 909-395-2000		<div style="text-align: center;">   </div> <div style="text-align: right;"> <b>California Form 802</b>          For Official Use Only       </div> <div style="margin-top: 20px;"> <input checked="" type="checkbox"/> <b>Amendment</b> (Must provide explanation in Part 3.)          Date of Original Filing: 09/07/10  <small>(month, day, year)</small> </div>
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**2. Function, Event, or Ceremonial Role Information**

Title Professional Bull Riding      Face Value of Each Admission \$ 67.00

Description Professional Bull Riding      Date(s) 08 / 28 / 10

Ticket(s)/Admission(s) provided by agency? Yes ☐ No ☒ If no: AEG  
Name of Source

Was the distribution to persons identified below made at the behest of an agency official?

Yes ☒ No ☐ If yes: Chris Hughes, City Manager  
Official's Name (Last, First) and Title

**The identity of recipient(s) and the explanation:**

Name (Last, First) or Organization (Name, Address, Description)	Number of Admission(s)/ Ticket(s)	Agency Official	<ul style="list-style-type: none"> <li>Check the income box if the agency official claims admission as taxable income. If the agency official performed a ceremonial role, also provide a description.</li> <li>If not income, describe the public purpose, including ceremonial roles, performed by an agency official, individual, or organization.</li> </ul>
Bowman, Jim	1	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Section 4, (I) <span style="float: right;">Income <input type="checkbox"/></span>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>
		Yes <input type="checkbox"/> No <input type="checkbox"/>	Income <input type="checkbox"/>

**3. Verification**

*I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution of admissions, set forth above, is in accordance with the provisions.*

 Signature of Agency Head or Designee	Chris Hughes Print Name	City Manager Title	03/29/11 (month, day, year)
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Comment: (Use this space or an attachment for any additional information including amendment explanation.)

ALL TICKETS PROVIDED PURSUANT TO SEC. 4.6.1 OF THE AEG EVENT CENTER OPERATING AGREEMENT