**Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions** A Public Document 1. Agency Name Date Stamp California **Form** Ontario International Airport Authority For Official Use Only Division, Department, or Region (if applicable) **Designated Agency Contact** (Name, Title) Norma I. Alley, MMC, Board Clerk Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail 909-544-5307 Date of Original Filing: \_ clerk@flyontario.com (month, day, year) 2. Function or Event Information 119 Face Value of Each Ticket/Pass \$ \_ Does the agency have a ticket policy? Yes ■ No □ Event Description: USC Football vs Stanford Date(s) 09 Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? If no: \_ Yes No 🗆 Name of Source If yes: Elkadi, Atif Was ticket distribution made at the behest Yes ■ No □ Official's Name (Last, First) of agency official? 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. Number Name of Agency, Department or Unit of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy A. **Passes** Executive Section 4 (r) 2 **Marketing Communications** Section 4 (r) 4 Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) **Passes** Ceremonial Role Other  $\square$ Income If checking "Ceremonial Role" or "Other" describe below: Ceremonial Role Other  $\square$ Income If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ C. (include address and description) Passes 4. Verification nderstand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance

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Comment:

Norma I. Alley

**Board Clerk** 

10/30/2023

Signature of Agency Head or Designee

Print Name

Title

(month, day, year)