Agency Report of:

C	eremonial Role Even	ts and Ticket/	Pass Distr	ibutions	Α	Public Document
-	Agency Name				Date Stamp	
	Oakland Alameda County C	Coliseum Authority				Form 802
	Division, Department, or Reg	ion (if applicable)				For Official Use Only
	Henry Gardner, Executive D	Director			9	
	Designated Agency Contact	(Name, Title)				
					Amondment (14-45)	1.5.1.1.1.2.10.1
	Area Code/Phone Number	E-mail		****	Amendment (Must Pi	rovide Explanation in Part 3.)
	510.383.4801	rsavage@coliseun	n.com		Date of Original Filing:	(month, day, year)
2.	Function or Event Infor	mation				
	Does the agency have a tick	ket policy? Yes	■ No□ F	ace Value of	Each Ticket/Pass \$	162.50
	Event Description: Banda C			Date(s)		*
	Event Description.	Provide Title/ Expla	anation L	Jate(s)		
	Ticket(s)/Pass(es) provided	by agency? Yes	■ No 🗆 I	f no:		
	\A/- 4'-11- B-1-10		1	f yes: Iglesias	Name of Source Chris	
	Was ticket distribution made	at the behest Yes	No 🗆	r yes:	Official's Name (Last, First)	
	of agency official?					
3.	Recipients			THE COLUMN TWO IS NOT THE OWNER.		
	 Use Section A to identify the agen 	cy's department or unit.	Use Section B to i	dentify an individu	al. Use Section C to identify	an outside organization.
	A. Name of Agency, Depa	ertment or Unit	Number	Describe at		
	A. Name of Agency, Depa	rulent or omt	of Ticket(s)/ Passes	Describe the	e public purpose made purs	uant to the agency's policy
		-				
	B. Name of Indi		Number of Ticket(s)/		Identify one of the fo	illowing:
	(Last, Firs	st)	Passes			
	Iglesias, Chris		40	100 mm	onial Role Other O	Income
	iglesias, Criris		16		ing "Ceremonial Role" or "Other" desc	
	***************************************			to provide of	pportunities to commu	nity groups
					onial Role Other O	Income
				II Griecki	ng Ceremonial Role of Other desc	cribe below:
		· · · · · · · · · · · · · · · · · · ·	Number			
	C. Name of Outside Or (include address and		of Ticket(s)/	Describe the	public purpose made purs	uant to the agency's policy
			Passes	 		
				 		
_	Verification					
		DC Populations 1904	1 and 10012	l barra resulti - 1 1	L-14L- 11-1-11-11-11-11-11-11-11-11-11-11-11-	4
	I have read and understand FPI with the requirements.	C Regulations 18944	. i and 18942. i	i nave verified ti	nat the distribution set for	τη above, is in accordance
-	Rouse Dala	Renee Savag	ie	Ticket	Administrator	11 1 20
-	Signature of Agency Head or Designs	7/	rint Name		Title	(month, day, year)
						(, day, your)
	Comment:					

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FPPC Form 802 (2/2016) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions 1. Agency Name A Public Document Oakland Alameda County Coliseum Authority Date Stamp Division, Department, or Region (if applicable) California Form Henry Gardner, Executive Director For Official Use Only Designated Agency Contact (Name, Title) Area Code/Phone Number E-mail ☐ Amendment (Must Provide Explanation in Part 3.) 510.383.4801 rsavage@coliseum.com Date of Original Filing: 2. Function or Event Information (month, day, year) Does the agency have a ticket policy? Face Value of Each Ticket/Pass \$ _ Yes 📕 No 🗆 143.75 Event Description: Zac Brown Date(s) _____/ Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes 📗 No 🗆 If no: _ Was ticket distribution made at the behest Yes ■ No □ Name of Source If yes: Haubert, David of agency official? Official's Name (Last, First) 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. Name of Agency, Department or Unit Number Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ Passes B. Number Name of Individual of Ticket(s)/ (Last, First) Identify one of the following: Passes Ceremonial Role Haubert, David Other Income 16 If checking "Ceremonial Role" or "Other" describe below: to provide opportunities to community groups Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below. Name of Outside Organization Number C. Describe the public purpose made pursuant to the agency's policy (include address and description) of Ticket(s)/ Passes 4. Verification I have read and understand FPPC Regulations 18944.1 and 18942. I have verified that the distribution set forth above, is in accordance

Ticket Administrator

11-6-22

Renee Savage

Agency Report of: Ceremonial Role E

Cere	monial	Role	Events	and	Ticket/Pass	Distributions
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1.	Agency Name		400 2101	ibutions	Date Stamp	California 802
	Oakland Alameda County (
	Division, Department, or Reg	ion (if applicable)				For Official Use Only
	Henry Gardner, Executive [
	Designated Agency Contact	(Name,Title)				
	Area Code/Phone Number	E-mail			Amendment (Must	Provide Explanation in Part 3.)
	510.383.4801	rsavage@coliseum	com		Date of Original Filing	
_	Construction of the Special Co				Date of Original Filling	(month, day, year)
2.	Function or Event Infor					400.00
	Does the agency have a tick		■ No 🗆 F	Face Value of	Each Ticket/Pass \$ _	100.00
	Event Description: Royal Co	omedy Tour		Date(s)1	<u>, 11 , 22 </u>	7 /
		Provide Title/ Expla	nation	, ,		
	Ticket(s)/Pass(es) provided	by agency? Yes		f no:	M	
	Was ticket distribution made	at the behest Vas	■ No□ I	f yes: Iglesias	, Chris	
	of agency official?	les l	INO L		Official's Name (Last, First)	
3.	Recipients					
	Use Section A to identify the ager	cy's department or unit. •		identify an individu	al. Use Section C to ident	ify an outside organization.
	A. Name of Agency, Depart	artment or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made pu	rsuant to the agency's policy
	B. Name of Indi		Number of Ticket(s)/ Passes		Identify one of the	following:
	Iglesias, Chris		4	If check	onial Role Other I	escribe below:
					onial Role Other I	
	C. Name of Outside O (include address and		Number of Ticket(s)/ Passes	Describe the	e public purpose made pu	rsuant to the agency's policy
4.	Verification					
	I have read and understand FP	PC Regulations 18944	.1 and 18942.	I have verified to	hat the distribution set t	forth above is in accordance
	with the requirements.				Clourbation 36t I	S above, is in accordance
	tehele non	(1/ Renee Savag	e	Ticke	t Administrator	11-11-22
	Signature of Agency Head or Design	ee Pr	int Name	-	Title	(month, day, year)
						25 to 2000 to
	Comment:					

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FPPC Form 802 (2/2016) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Agency Report of:

C	eremonial Role Ever	its and Ticket/F	ass Distr	ibutions	Α	Public Document
1.	Agency Name				Date Stamp	California 802
	Oakland Alameda County (Form OUZ
	Division, Department, or Reg	ion (if applicable)			1	For Official Use Only
	Henry Gardner, Executive I					
	Designated Agency Contact	(Name, Title)			1	
					Amendment (Must P	Provide Explanation in Part 3.)
	Area Code/Phone Number	E-mail			STORE OF	
	510.383.4801	rsavage@coliseum	i.com		Date of Original Filing:	(month, day, year)
2.	Function or Event Infor	mation				
	Does the agency have a tic	ket policy? Yes	■ No □ F	ace Value of	Each Ticket/Pass \$	137.50
	Event Description: Wishin				, 20 , 22	
		Provide Title/ Expla	nation L	Date(s)	/	
	Ticket(s)/Pass(es) provided	by agency? Yes			Name of Source	
	Was ticket distribution made	at the hehest Vac	= N = 1	f ves. Iglesias	Name of Source Chris Official's Name (Last, First)	
	of agency official?	out the beliest Yes	■ No L	, , 00.	Official's Name (Last, First)	
3.	Recipients					
	Use Section A to identify the ager	ncy's department or unit. •		dentify an individu	ual. Use Section C to identif	y an outside organization.
	A. Name of Agency, Dep	artment or Unit	Number of Ticket(s)/	Describe th	e public purpose made pur	suant to the agency's policy
			Passes			
	B. Name of Ind	ividual	Number		Idontificano estra s	
	(Last, Fi		of Ticket(s)/ Passes		Identify one of the f	ollowing:
				(0.000-0.000)	nonial Role Other	
	Iglesias, Chris		6		king "Ceremonial Role" or "Other" des	
	And the second s			to provide o	pportunities to commu	unity groups
					nonial Role Other	
				If check	king "Ceremonial Role" or "Other" des	scribe below:
			Number			
	C. Name of Outside O (include address and		of Ticket(s)/	Describe th	e public purpose made pur	suant to the agency's policy
			Passes			
4.	Verification					
	I have read and understand FF	PC Regulations 18944	.1 and 18942	I have verified t	hat the distribution set for	orth ahove is in accordance
	with the requirements.	2 4 4		· ···are reimea :	nat the distribution set to	nar above, is in accordance
_	Kerle Wil	(Renee Savag	e	Ticke	t Administrator	1/-20-27
	Signature of Agency Head or Design	Pi	rint Name		Title	(month, day, year)

Comment: _

C		T: 1 4/D D: 4 11 41	
Ceremoniai	Role Events and	Ticket/Pass Distributions	

	ency Report of: remonial Role Even	ts and Ticket/F	ass Distr	ibutions	A	Public Document
. /	Agency Name Oakland Alameda County C	coliseum Authority			Date Stamp	California 802 Form For Official Use Only
	Division, Department, or Reg Henry Gardner, Executive D					For Official Ose Only
1.0	Designated Agency Contact					
					Amendment (Must F	Provide Explanation in Part 3.)
	Area Code/Phone Number	E-mail				COST WAY TO SERVICE SET PROPERTY OF A SET OF SET
	510.383.4801	rsavage@coliseum	i.com		Date of Original Filing:	(month, day, year)
. 1	Function or Event Infor	mation				107.50
	Does the agency have a tick		■ No 🗆 F	ace Value of	Each Ticket/Pass \$	137.50
I	Event Description: Milenniu	m Tour		Date(s)11	<u>/ 27 / 22 </u>	
	Ticket(s)/Pass(es) provided	Provide Title/ Expla		f no:		
				Baker (Name of Source	
١	Was ticket distribution made	at the behest Yes	■ No 🗆 🏻 I	f yes: Baker, (Official's Name (Last, First)	-
	of agency official?					
	Recipients					
	Use Section A to identify the agen	cy's department or unit. •		dentify an individu	ual. Use Section C to identif	y an outside organization.
	A. Name of Agency, Depart	rtment or Unit	Number of Ticket(s)/	Describe th	e public purpose made pur	suant to the agency's policy
			Passes			
			Number			
	B. Name of Indi		of Ticket(s)/ Passes		Identify one of the f	ollowing:
				Cerem	nonial Role Other	Income [
	Baker, Chuck		4	1	king "Ceremonial Role" or "Other" de	
						to maximize revenues
				1	nonial Role Other cing "Ceremonial Role" or "Other" de	
	C. Name of Outside Or (include address and		Number of Ticket(s)/ Passes	Describe the	e public purpose made pur	suant to the agency's policy
0.0						
_						
	Verification	000	-			
V	have read and understand FP vith the requirements.	-c Regulations 18944	.1 and 18942.	I have verified t	hat the distribution set fo	orth above, is in accordance
	Kenle riva	L9 (Renee Savag	е	Ticke	t Administrator	11-76-22
-	Signature of Agency Head or Designature		int Name		Title	(month, day, year)

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Comment: _

Clear

FPPC Form 802 (2/2016) FPPC Toll-Free Helpline: 866/ASK-FPPC (866/275-3772)

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California Form Oakland Alameda County Coliseum Authority Division, Department, or Region (if applicable) For Official Use Only Henry Gardner, Executive Director Designated Agency Contact (Name, Title) Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail 510.383.4801 rsavage@coliseum.com Date of Original Filing: _ (month, day, year) 2. Function or Event Information 137.50 Does the agency have a ticket policy? Face Value of Each Ticket/Pass \$ _ Yes No 🗆 Event Description: Milennium Tour Date(s) 11 / 27 / Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? If no: _ Yes No 🗆 Name of Source If yes: Gardner, Henry 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 A. Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ Passes Number B. Name of Individual of Ticket(s)/ Identify one of the following: (Last, First) **Passes** Ceremonial Role Other Income Gardner, Henry If checking "Ceremonial Role" or "Other" describe below: 5 to promote the coliseum complex to maximize revenues Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: Number Name of Outside Organization C. Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ (include address and description) Passes

	11-		120000		
4.	ve	riti	cai	OII	n

I have read and unders	tand FPPC Regulations	18944.1 and 1	8942. I have v	erified that the d	distribution set forth	above, is in	accordance
with the requirements.							

Kenel Lava	Renee Savage
Signature of Agency Head or Designee	Print Name

Ticket Administrator

1-2	60	0
(mont)	day i	earl

Comment: _