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

A Public Document

1. Agency Name

Oakland Alameda County Coliseum Authority

Division, Department, or Region *(if applicable)*

Henry Gardner, Executive Director

Designated Agency Contact *(Name, Title)*

Area Code/Phone Number	E-mail
510.383.4801	rsavage@coliseum.com

Date Stamp

California Form **802**

For Official Use Only

☐ **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 $ 143.75

Event Description: Alicia Keys Concert *(Provide Title/ Explanation)* Date(s) 08 / 01 / 23 ___/___/___

Ticket(s)/Pass(es) provided by agency? Yes ■ No ☐ If no: _____ *(Name of Source)*

Was ticket distribution made at the behest of agency official? Yes ■ No ☐ If yes: Gardner, Henry *(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)/ Passes	Describe the public purpose made pursuant to the agency's policy

B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Gardner, Henry	4	Ceremonial Role ☐ Other ■ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:* to promote the Coliseum and generate revenues
		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)/ Passes	Describe the public purpose made pursuant to the agency's policy

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 with the requirements.

Renee Savage — Signature of Agency Head or Designee

Renee Savage — Print Name

Ticket Administrator — Title

8-1-23 *(month, day, year)*

Comment: _____

Print Clear

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

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1. Agency Name

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Division, Department, or Region *(if applicable)*

Henry Gardner, Executive Director

Designated Agency Contact *(Name, Title)*

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☐ **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 $ 143.75

Event Description: Alicia Keys *Provide Title/ Explanation* Date(s) 08 / 01 / 23 ___/___/___

Ticket(s)/Pass(es) provided by agency? Yes ■ No ☐ If no: _____ *Name of Source*

Was ticket distribution made at the behest of agency official? Yes ■ No ☐ If yes: Iglesias, 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)/ Passes	Describe the public purpose made pursuant to the agency's policy

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Passes	Identify one of the following:
Yamada, Allie	2	Ceremonial Role ☐ Other ■ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:* to promote the Coliseum and generate revenue
		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)/ Passes	Describe the public purpose made pursuant to the agency's policy

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 with the requirements.

Signature of Agency Head or Designee	Print Name	Title	*(month, day, year)*
Renee Savage	Renee Savage	Ticket Administrator	8-1-23

Comment: _____

Print Clear

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

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Division, Department, or Region *(if applicable)*

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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 $ 143.75

Event Description: Alicia Keys *Provide Title/ Explanation* Date(s) 08 / 01 / 23 ___/___/___

Ticket(s)/Pass(es) provided by agency? Yes ■ No ☐ If no: _____ *Name of Source*

Was ticket distribution made at the behest of agency official? Yes ■ No ☐ If yes: Jenkins, Kevin *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)/ Passes	Describe the public purpose made pursuant to the agency's policy

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Passes	Identify one of the following:
Jenkins, Kevin	4	Ceremonial Role ☐ Other ■ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:* to promote the Coliseum and generate revenue
		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)/ Passes	Describe the public purpose made pursuant to the agency's policy

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 with the requirements.

Renee Savage — Signature of Agency Head or Designee

Renee Savage — Print Name

Ticket Administrator — Title

8-1-23 *(month, day, year)*

Comment: _____

Print Clear

Agency Report of:
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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 $ 225.00

Event Description: Lil' Baby *Provide Title/ Explanation* Date(s) 08 / 06 / 23 ___/___/___

Ticket(s)/Pass(es) provided by agency? Yes ■ No ☐ If no: _____ *Name of Source*

Was ticket distribution made at the behest of agency official? Yes ■ No ☐ If yes: Haubert, David *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)/ Passes	Describe the public purpose made pursuant to the agency's policy

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Passes	Identify one of the following:
Immadi, Rameshu	2	Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:* to promote Coliseum and generate revenues
		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)/ Passes	Describe the public purpose made pursuant to the agency's policy

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 with the requirements.

Renee Savage — Signature of Agency Head or Designee

Renee Savage — Print Name

Ticket Administrator — Title

8-6-23 *(month, day, year)*

Comment: _____

Print Clear

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

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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 $ 225.09

Event Description: Lil' Baby *Provide Title/ Explanation* Date(s) 08 / 06 / 23 ___/___/___

Ticket(s)/Pass(es) provided by agency? Yes ■ No ☐ If no: _____ *Name of Source*

Was ticket distribution made at the behest of agency official? Yes ■ No ☐ If yes: Jenkins, Kevin *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)/ Passes	Describe the public purpose made pursuant to the agency's policy

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Passes	Identify one of the following:
Jenkins, Kevin	4	Ceremonial Role ☐ Other ■ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:* to promote the Coliseum and generate revenue
		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)/ Passes	Describe the public purpose made pursuant to the agency's policy

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 with the requirements.

Renee Savage — Signature of Agency Head or Designee

Renee Savage — Print Name

Ticket Administrator — Title

8-6-23 *(month, day, year)*

Comment: _____

Print Clear

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

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Division, Department, or Region *(if applicable)*

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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 $ 225.00

Event Description: Lil" Baby *Provide Title/ Explanation* Date(s) 08 / 06 / 23 ___/___/___

Ticket(s)/Pass(es) provided by agency? Yes ■ No ☐ If no: _____ *Name of Source*

Was ticket distribution made at the behest of agency official? Yes ■ No ☐ If yes: Gardner, Henry *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)/ Passes	Describe the public purpose made pursuant to the agency's policy

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Passes	Identify one of the following:
Johnson, Jestin	3	Ceremonial Role ☐ Other ■ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:* to promote the Coliseum and generate revenues
		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)/ Passes	Describe the public purpose made pursuant to the agency's policy

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 with the requirements.

Signature of Agency Head or Designee	Print Name	Title	*(month, day, year)*
Renee Savage	Renee Savage	Ticket Administrator	8-6-23

Comment: _____

Print Clear

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

A Public Document

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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 $ 225.00

Event Description: Lil" Baby *Provide Title/ Explanation* Date(s) 08 / 06 / 23 ___/___/___

Ticket(s)/Pass(es) provided by agency? Yes ■ No ☐ If no: _____ *Name of Source*

Was ticket distribution made at the behest of agency official? Yes ■ No ☐ If yes: Gardner, Henry *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)/ Passes	Describe the public purpose made pursuant to the agency's policy

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Passes	Identify one of the following:
Gardner, Taylor	7	Ceremonial Role ☐ Other ■ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:* to promote the Coliseum and generate revenues
		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)/ Passes	Describe the public purpose made pursuant to the agency's policy

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 with the requirements.

Renee Savage — Signature of Agency Head or Designee

Renee Savage — Print Name

Ticket Administrator — Title

8-6-23 *(month, day, year)*

Comment: _____

Print Clear

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

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510.383.4801	rsavage@coliseum.com

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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 $ 87.50

Event Description: Cirque Du Soleil *Provide Title/ Explanation* Date(s) 08 / 20 / 23 ___/___/___

Ticket(s)/Pass(es) provided by agency? Yes ■ No ☐ If no: _____ *Name of Source*

Was ticket distribution made at the behest of agency official? Yes ■ No ☐ If yes: Gardner, Henry *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)/ Passes	Describe the public purpose made pursuant to the agency's policy

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Passes	Identify one of the following:
Gardner, Henry	6	Ceremonial Role ☐ Other ■ Income ☐ *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:*

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

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 with the requirements.

Renee Savage — Signature of Agency Head or Designee

Renee Savage — Print Name

Ticket Administrator — Title

8-20-23 *(month, day, year)*

Comment: _____

Print Clear

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

A Public Document

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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 $ 87.50

Event Description: Cirque Du Soleil *Provide Title/ Explanation* Date(s) 08 / 19 / 23 ___/___/___

Ticket(s)/Pass(es) provided by agency? Yes ■ No ☐ If no: _____ *Name of Source*

Was ticket distribution made at the behest of agency official? Yes ■ No ☐ If yes: Gardner, Henry *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)/ Passes	Describe the public purpose made pursuant to the agency's policy

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Passes	Identify one of the following:
Boubaker, Monia	8	Ceremonial Role ☐ Other ■ Income ☐ *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:*

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

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 with the requirements.

Renee Savage — Signature of Agency Head or Designee

Renee Savage — Print Name

Ticket Administrator — Title

8-20-23 — *(month, day, year)*

Comment: _____

Print Clear

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

A Public Document

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Division, Department, or Region *(if applicable)*

Henry Gardner, Executive Director

Designated Agency Contact *(Name, Title)*

Area Code/Phone Number	E-mail
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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 $ 137.50

Event Description: Zach Bryan *Provide Title/ Explanation* Date(s) 08 / 21 / 23 ___/___/___

Ticket(s)/Pass(es) provided by agency? Yes ■ No ☐ If no: _____ *Name of Source*

Was ticket distribution made at the behest of agency official? Yes ■ No ☐ If yes: Haubert, David *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)/ Passes	Describe the public purpose made pursuant to the agency's policy

B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Nielsen, Ryan	16	Ceremonial Role ☐ Other ☐ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:* to promote Coliseum and generate revenues
		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)/ Passes	Describe the public purpose made pursuant to the agency's policy

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 with the requirements.

Signature of Agency Head or Designee	Print Name	Title	(month, day, year)
Renee Savage	Renee Savage	Ticket Administrator	8-21-23

Comment: _____

Print Clear

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

A Public Document

1. Agency Name

Oakland Alameda County Coliseum Authority

Division, Department, or Region *(if applicable)*

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Designated Agency Contact *(Name, Title)*

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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 $ 87.50

Event Description: Cirque Du Soleil *Provide Title/ Explanation* Date(s) 08 / 19 / 23 08 / 20 / 23

Ticket(s)/Pass(es) provided by agency? Yes ■ No ☐ If no: _____ *Name of Source*

Was ticket distribution made at the behest of agency official? Yes ■ No ☐ If yes: Jenkins, Kevin *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)/ Passes	Describe the public purpose made pursuant to the agency's policy

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Passes	Identify one of the following:
Jenkins, Kevin	4 per day	Ceremonial Role ☐ Other ■ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:* to promote the Coliseum and generate revenue
		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)/ Passes	Describe the public purpose made pursuant to the agency's policy

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 with the requirements.

Signature of Agency Head or Designee	Print Name	Title	*(month, day, year)*
Renee Savage	Renee Savage	Ticket Administrator	8·20·23

Comment: _____

Print Clear

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2. Function or Event Information

Does the agency have a ticket policy? Yes ■ No ☐ Face Value of Each Ticket/Pass $ 156.25

Event Description: Sam Smith *Provide Title/ Explanation* Date(s) 08 / 27 / 23 ___/___/___

Ticket(s)/Pass(es) provided by agency? Yes ■ No ☐ If no: _____ *Name of Source*

Was ticket distribution made at the behest of agency official? Yes ■ No ☐ If yes: Iglesias, 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)/ Passes	Describe the public purpose made pursuant to the agency's policy

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Passes	Identify one of the following:
Padilla, Lydia	4	Ceremonial Role ☐ Other ■ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:* to promote the Coliseum and generate revenue
		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)/ Passes	Describe the public purpose made pursuant to the agency's policy

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 with the requirements.

Signature of Agency Head or Designee	Print Name	Title	*(month, day, year)*
Renee Savage	Renee Savage	Ticket Administrator	8·27·23

Comment: _____

Print Clear

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Ceremonial Role Events and Ticket/Pass Distributions

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Division, Department, or Region *(if applicable)*

Henry Gardner, Executive Director

Designated Agency Contact *(Name, Title)*

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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 $ 156.25

Event Description: Sam Smith *Provide Title/ Explanation* Date(s) 08 / 27 / 23 ___/___/___

Ticket(s)/Pass(es) provided by agency? Yes ■ No ☐ If no: _____ *Name of Source*

Was ticket distribution made at the behest of agency official? Yes ■ No ☐ If yes: Jenkins, Kevin *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)/ Passes	Describe the public purpose made pursuant to the agency's policy

B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:
Jenkins, Kevin	4	Ceremonial Role ☐ Other ■ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:* to promote the Coliseum and generate revenue
		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)/ Passes	Describe the public purpose made pursuant to the agency's policy

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 with the requirements.

Signature of Agency Head or Designee	Print Name	Title	(month, day, year)
Renee Savage	Renee Savage	Ticket Administrator	8-27-23

Comment: _____

Print Clear

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

A Public Document

Date Stamp	California Form **802** For Official Use Only

☐ **Amendment** *(Must Provide Explanation in Part 3.)*

Date of Original Filing: _____ *(month, day, year)*

1. Agency Name

Oakland Alameda County Coliseum Authority

Division, Department, or Region *(if applicable)*

Henry Gardner, Executive Director

Designated Agency Contact *(Name, Title)*

Area Code/Phone Number	E-mail
510.383.4801	rsavage@coliseum.com

2. Function or Event Information

Does the agency have a ticket policy? Yes ■ No ☐ Face Value of Each Ticket/Pass $ 64.00

Event Description: A's Baseball *(Provide Title/ Explanation)* Date(s) 08 / 20 / 23 ___/___/___

Ticket(s)/Pass(es) provided by agency? Yes ■ No ☐ If no: _____ *(Name of Source)*

Was ticket distribution made at the behest of agency official? Yes ■ No ☐ If yes: Gardner, Henry *(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)/ Passes	Describe the public purpose made pursuant to the agency's policy

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Passes	Identify one of the following:
Gardner, Henry	16	Ceremonial Role ☐ Other ■ Income ☐ *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:*

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

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 with the requirements.

Renee Savage — Signature of Agency Head or Designee

Renee Savage — Print Name

Ticket Administrator — Title

8-20-23 *(month, day, year)*

Comment: _____

Print Clear

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

A Public Document

1. Agency Name

Oakland Alameda County Coliseum Authority

Division, Department, or Region *(if applicable)*

Henry Gardner, Executive Director

Designated Agency Contact *(Name, Title)*

Area Code/Phone Number	E-mail
510.383.4801	rsavage@coliseum.com

Date Stamp

California Form **802**

For Official Use Only

☐ **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 $ 64.00

Event Description: A's Baseball *Provide Title/ Explanation* Date(s) 08 / 06 / 23 ___/___/___

Ticket(s)/Pass(es) provided by agency? Yes ■ No ☐ If no: _____ *Name of Source*

Was ticket distribution made at the behest of agency official? Yes ■ No ☐ If yes: Iglesias, 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)/ Passes	Describe the public purpose made pursuant to the agency's policy

B. Name of Individual *(Last, First)*	Number of Ticket(s)/ Passes	Identify one of the following:
Iglesias, Wen	6	Ceremonial Role ☐ Other ■ Income ☐ *If checking "Ceremonial Role" or "Other" describe below:* to promote the Coliseum and generate revenue
		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)/ Passes	Describe the public purpose made pursuant to the agency's policy

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 with the requirements.

Signature of Agency Head or Designee	Print Name	Title	*(month, day, year)*
Renee Savage	Renee Savage	Ticket Administrator	8-6-23

Comment: _____

Print Clear