Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name California Date Stamp Oakland Alameda County Coliseum Authority For Official Use Only Division, Department, or Region (if applicable) 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 62.50 Does the agency have a ticket policy? Face Value of Each Ticket/Pass \$ _ Yes No 🗆 Event Description: DOI Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes 📕 No 🗌 If no: Name of Source If yes: Muranishi, Susan 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 A. Name of Agency, Department or Unit of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy Passes Number B. Name of Individual of Ticket(s)/ Passes Identify one of the following: (Last, First) Ceremonial Role Other 🔲 Income | Muranishi, Susan If checking "Ceremonial Role" or "Other" describe below: 16 to provide opportunities to community groups Ceremonial Role Other Income ___ If checking "Caramonial Role" or "Other" describe below. Number Name of Outside Organization C. of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy (include address and description) Passes

4. Verification

Comment:

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	and the secondarios

Lene Danige

Renee Savage

Print

Ticket Administrator

ame

Title

(month, day, year)

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 California Date Stamp 1. Agency Name Form Oakland Alameda County Coliseum Authority For Official Use Only Division, Department, or Region (if applicable) Henry Gardner, Executive Director Designated Agency Contact (Name, Title) Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: _ 510.383.4801 rsavage@coliseum.com (month, day, year) 2. Function or Event Information 62,50 Face Value of Each Ticket/Pass \$ _ Does the agency have a ticket policy? Yes No 🗆 Date(s) 🕢 Event Description: DOI Provide Title/ Explanation If no: Ticket(s)/Pass(es) provided by agency? Yes No 🗖 Name of Source If yes: Haubert, David 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 Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ A. Passes Number Name of Individual Identify one of the following: B. of Ticket(s)/ (Last, First) Passes Ceremonial Role Other 🔲 Income If checking "Ceremonial Role" or "Other" describe below: 16 Tiffany, Michael to provide opportunities to community groups Income Other \square Ceremonial Role 🔲 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

I have read and understand FPPC Regulations 18944.1 and 169	942. I have verilled that the distribution set forth above, is in accord	Janico
with the requirements.		
with the requirements.	Ticket Administrator 2-7/-	- 2
AVIVI I DAMA CAMARA	Tioket Administrator / Ta//	~

eruc wy Signature of Agency Head or Design

/ Renee Savage

Print

Ticket Administrator

Comment: _

Print Name

Title

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 California 1. Agency Name Date Stamp Oakland Alameda County Coliseum Authority For Official Use Only Division, Department, or Region (if applicable) Henry Gardner, Executive Director Designated Agency Contact (Name, Title) ■ Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: . 510.383.4801 rsavage@coliseum.com (month, day, year) 2. Function or Event Information 62.50 Does the agency have a ticket policy? Face Value of Each Ticket/Pass \$. Yes ☐ No ☐ Date(s) Event Description: DOI Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? If no: Yes No 🗆 Name of Source If yes: Iglesias. Chris 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 Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ A. Passes Number Name of Individual В. of Ticket(s)/ Identify one of the following: (Last, First) Passes Other Ceremonial Role Income If checking "Ceremonial Role" or "Other" describe below: Iglesias, Chris 4 to provide opportunities to community groups Other 🔲 Ceremonial Role Income __ If checking "Ceremonial Role" or "Other" describe below:

4. Verification

C.

I have read and understand FPPC Regulation	is 18944.1 and 18942	. I have verified that the	distribution set forth at	oove, is in accordance
with-the requirements				

Number

of Ticket(s)/

Passes

Sene Davager

Name of Outside Organization

(include address and description)

Renee Savage

Print

Ticket Administrator

diffe di

Comment:

Clear

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

Describe the public purpose made pursuant to the agency's policy

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document California 1. Agency Name Date Stamp Form Oakland Alameda County Coliseum Authority For Official Use Only Division, Department, or Region (if applicable) Henry Gardner, Executive Director Designated Agency Contact (Name, Title) ☐ Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mall Date of Original Filing: _ 510.383.4801 (month, day, year) 2. Function or Event Information 62.50 Face Value of Each Ticket/Pass \$ -Does the agency have a ticket policy? Yes No 🗆 Date(s) 2 25 Event Description: DOI Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? If no: Yes ☐ No ☐ Name of Source If yes: Jenkins, Kevin 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 Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ A. Passes Number Name of Individual of Ticket(s)/ identify one of the following: B. (Last, First) Passes Other 🔲 Ceremonial Role Income If checking "Ceremonial Role" or "Other" describe below: Jenkins, Kevin 5 to provide opportunities to community groups Other Ceremonial Role Income If checking "Geremonial Role" or "Other" describe below. Number of Ticket(s)/ Name of Outside Organization C. Describe the public purpose made pursuant to the agency's policy (include address and description) Passes

4. Verification

Comment: _

I have read and understand FPPC Regulations	18944.1 and 189	42. I have verified tha	t the distribution set :	forth above, is	in accordance
with the requirements.					_

ence Savage

Ticket Administrator

Title

Agency Report of:

U	eremoniai Role Even	ts and lickeve	ass Distri	butions	F	A Public Document	
1.	Agency Name				Date Stamp	California 802	
	Oakland Alameda County C	coliseum Authority					
	Division, Department, or Reg	ion (if applicable)				For Official Use Only	
	Henry Gardner, Executive D	Director				1	
	Designated Agency Contact	(Name, Title)					
						D 11 5 1 11 1 D 101	
	Area Code/Phone Number	E-mail			Amenament (Must	Provide Explanation in Part 3.)	
	510.383.4801	rsavage@coliseum	.com		Date of Original Filing		
_	Francisco Francisco Administra					(month, day, year)	
۷.	Function or Event Infor		_			62.50	
	Does the agency have a tick	ket policy? Yes [□ No □ F	ace Value of	Each Ticket/Pass \$_	52,55	
	Event Description: DOI			Date(s)	23 23		
		Provide Title/ Explai	nation				
	Ticket(s)/Pass(es) provided	by agency? Yes	■ No 🗆 🖽	no:			
	Was ticket distribution made	at the hehest V	.	Iglesias	Name of Source Chris		
	of agency official?	at the beliest Yes	■ No LI "	yes:	, Chris Official's Name (Last, First,		
	or agonoy omorar:						
3.	Recipients						
	Use Section A to identify the agent	cy's department or unit. •	Use Section B to i	dentify an Individu	al. Use Section C to ident	tify an outside organization.	
	A Name of Agency Dans	edment or Mait	Number	December the		remark to the grantile wallers	
	A. Name of Agency, Department or Unit		of Ticket(s)/ Describe the		ne public purpose made pursuant to the agency's policy		
	\$ 						
	2						
	B. Name of Indi	vidual	Number		14	A. Harrida ar	
	(Last, Fire		of Ticket(s)/ Passes		Identify one of the	Tollowing:	
				Ceren	nonial Role Other	Income _	
	Iglesias, Chris		6		king "Ceremonial Role" or "Other" o	tescribe below:	
				to provide o	pportunities to comm	nunity groups	
				Ceren	nonial Role Other	Income [
				1	king Teremonial Role" or "Other" o		
	Name of Outside O	rganization	Number				
	C. (include address and		of Ticket(e)/ Passes	Describe th	e public purpose made pu	ursuant to the agency's policy	
				1			
	-						
4	Verification						
•	I have read and understand FF	PC Regulations 1904A	1 and 19042	I have verified	that the distribution and	forth about it in consider	
-	with the requirements.	ro Regulations 10944	.1 anu 10942.	i nave vermeu	mai ine distribution set	tortri above, is in accordance	
(School Venne	Renee Savag	ie.	Ticke	et Administrator	1-1-12	
1	Signature of Agency Head or Design		rint Name		Title	(month day year)	
					- 1979#		
	Comment:						

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions 1. Agency Name

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	Agency Name				Date Stamp Californía 802				
	Oakland Alameda County C	oliseum Authority				10/11/			
į	Division, Department, or Reg	on (if applicable)			1	For Official Use Only			
	Henry Gardner, Executive D	irector							
	Designated Agency Contact (Name, Title)			1				
					Amendment (Must 6	Provide Explanation in Part 3,)			
	Area Code/Phone Number	E-mail			Amondmont (mast)	TOVIGE Explanation III T Git G			
	510.383.4801	rsavage@coliseum	.com		Date of Original Filing:	(month, day, year)			
_	Function or Event Infor	nation				404.50			
	Does the agency have a tick	et policy? Yes	■ No□ F	ace Value of	Each Ticket/Pass \$ _	131.50			
	Event Description: Soul II S	OUI Provide Title/ Expla	nation D	ate(s) Z	11 23				
	Ticket(s)/Pass(es) provided	•	□ No □ If	no:	Name of Source				
	Was ticket distribution made	at the behest Yes	■ No□ If	yes: Gardne	r, Henry				
	of agency official?	100		,	Official's Name (Last, First)				
	Recipients					-			
	Use Section A to identify the agent	cy's department or unit. •	Use Section B to id	dentify an individ	ual. Use Section C to identi	ify an outside organization.			
A. Name of Agency, Department or Unit		Number of Ticket(s)/ Passes	Describe th	ne public purpose made pu	rsuant to the agency's policy				
	B. Name of Indi (Last, Fir.		Number of Ticket(s)/ Passes		identify one of the	following:			
	Savage, Renee		4	lf chec	monial Role Other Sking "Ceremonial Role" or "Other" d				
	? 								
					monial Role Other Other d	Income escribe below.			
	C. Name of Outside O		Number of Ticket(s)/ Passes	Describe th	he public purpose made pu	rsuant to the agency's policy			
	Verification I have read and understand FF	PPC Regulations 1894	4.1 and 18942.	I have verified	that the distribution set	forth above, is in accordance			
1	with the requirements.	Renee Sava	ge	Tick	et Administrator	2-3-27			
/	Signature of Agency Head or Design		Print Name		Title	(month, day, year)			
	Comment								
J)	Signature of Agency Head or Posign	nee F	Print Name	Tick		2-3-2 (month, day, ye			

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 For Official Use Only Division, Department, or Region (if applicable) Henry Gardner, Executive Director Designated Agency Contact (Name, Title) ☐ Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: . 510.383.4801 rsavage@coliseum.com (month, day, year) 2. Function or Event Information 137,50 Face Value of Each Ticket/Pass \$ Does the agency have a ticket policy? Yes ☐ No ☐ Date(s) 2 Event Description: Carrin Leon Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? If no: Yes No 🗌 Name of Source If yes: Iglesias, Chris Was ticket distribution made at the behest Yes ■ No □ Official's Name (Last, First) of agency official? 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. Number Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ A. Passes Number Name of individual B. of Ticket(s)/ Identify one of the following: (Last, First) Passes Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: Iglesias, Chris 10 to provide opportunities to community groups

			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		
Verific		0044 d and 40040 d	the second of the state of the		

I have read and understand FPPC Regulations 18944.1	1 and 18942. I have verified that the	distribution set forth above, is in	accordance
with the requirements			

Renee Savage

Ticket Administrator

Ceremonial Role

Income

Comment:

Print Name

Other 🔲

Ceremonial Role Events and Ticket/Pass Distributions California Date Stamp 1. Agency Name Form Oakland Alameda County Coliseum Authority For Official Use Only Division, Department, or Region (if applicable) Henry Gardner, Executive Director Designated Agency Contact (Name, Title) Amendment (Must Provide Explanation in Part 3.) E-mall Area Code/Phone Number Date of Original Filing: _ rsavage@coliseum.com (month, day, year) 510.383.4801 2. Function or Event Information 131,50 Face Value of Each Ticket/Pass \$__ Does the agency have a ticket policy? Yes 📕 No 🗖 Date(s) 2 11 23 Event Description: Soul II Soul Provide Title/ Explanation If no: _ Yes ☐ No ☐ Ticket(s)/Pass(es) provided by agency? 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 Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ A. Passes Number Identify one of the following: Name of Individual of Ticket(s)/ В. (Last, First) Passos Income 🔲 Ceremonial Role Other If checking "Ceremonial Role" or "Other" describe below: 4 Gardner, Taylor to promote Coliseum Complex to maximize revenues Income Other Ceremonial Role If checking "Ceremonial Role" or "Other" describe below. Number Describe the public purpose made pursuant to the agency's policy Name of Outside Organization of Ticket(s)/ C. (include address and description) 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. Ticket Administrator Renee Savage Comment:

A Public Document

Agency Report of:

	Pass Distri			Public Document
Agency Name			Date Stamp	California 802
Oakland Alameda County Coliseum Authority				For Official Use Only
Division, Department, or Region (if applicable)				
Henry Gardner, Executive Director				
Designated Agency Contact (Name, Title)				
Area Code/Phone Number E-mail			Amendment (Must F	Provide Explanation in Part 3.)
510.383.4801 rsavage@coliseur	n.com		Date of Original Filing:	(month, day, year)
Function or Event Information				62.50
Does the agency have a ticket policy? Yes	No □ F	ace Value of	Each Ticket/Pass \$ _	62.50
Event Description; DOI	D	2 (a) 2	26 23	
Provide Title/ Exp.	lanation	atc(s)		
Ticket(s)/Pass(es) provided by agency? Yes	□ No□ If	no:		
		Gardne	Name of Source r. Henry	
Was ticket distribution made at the behest Yes	No 🗌 If	yes: Gardne	Official's Name (Last, First)	
of agency official?				
Recipients • Use Section A to Identify the agency's department or unit.	• Use Section B to k	dentify an Individi	ual. Use Section C to ident	fy an outside organization.
A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe th	ne public purpose made pu	rauant to the agency's policy
	Number			
Name of individual (Last, First)	Number of Ticket(s)/ Passes		Identify one of the	following:
			nonial Role 🔲 Other	Income
Boubaker, Monia	5	1	king "Geremonial Role" or "Other" o	
		to provide o	opportunities to comm	unity groups
			monial Role Other Other Ching "Ceremonial Role" or "Other" of	Income
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe ti	he public purpose made pu	rsuant to the agency's policy
Verification				
vernication				
I have read and understand FPPC Regulations 189	44.1 and 18942.	I have verified	that the distribution set	forth above, is in accordant
			that the distribution set et Administrator	forth above, is in accordant

Comment: __

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions **A Public Document** Date Stamp California 1. Agency Name Form Oakland Alameda County Coliseum Authority For Official Use Only Division, Department, or Region (if applicable) Henry Gardner, Executive Director Designated Agency Contact (Name, Title) ■ Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: _ 510.383.4801 rsavage@coliseum.com (month, day, year) 2. Function or Event Information 62.50 Does the agency have a ticket policy? Face Value of Each Ticket/Pass \$_ Yes No 🗆 Date(s) 2 25 -23 Event Description: DOI 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 □ 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 Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ A. Passes Number Name of Individual Identify one of the following: of Ticket(s)/ B. (Last, First) Passes Income | Ceremonial Role Other If checking "Geremonial Role" or "Other" describe below: 12 Boubaker, Monia to provide opportunities to community groups Income Ceremonial Role Other If checking "Geremonial Role" or "Other" describe below. Number Name of Outside Organization of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy C. (include address and description) Passes 4. Verification

Comment: _

I have read and understand FPPC Regulations	s 18944.1 and 18	8942. I have v	verified that the	distribution set	forth above,	is in accordance
with the requirements.						

Kenul Savage
Signature of Agency Head or Designee

Renee Savage
Print

Print

Ticket Administrator

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 Date Stamp** California 1. Agency Name Form Oakland Alameda County Coliseum Authority For Official Use Only Division, Department, or Region (if applicable) Henry Gardner, Executive Director Designated Agency Contact (Name, Title) ■ Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: _ 510.383.4801 rsavage@coliseum.com (month, day, year) 2. Function or Event Information 62.50 Face Value of Each Ticket/Pass \$ _ Does the agency have a ticket policy? Yes No 🗆 Date(s) 2 23 23 Event Description: DOI 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 Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ A. Passes Number Name of Individual of Ticket(s)/ Identify one of the following: В. (Last, First) Passos Other Income | Ceremonial Role If checking "Ceremonial Role" or "Other" describe below: 2 Boubaker, Monia to provide opportunities to community groups Other Ceremonial Role 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 C. of Ticket(s)/ (include address and description) **Passes** M--161--41---

4	verification				
	I have read and understand EPPC	Regulations	18044 1	and	1

I have read and understand FPPC	Regulations 18944.1 and	18942. I have verified that the	distribution set forth above	, is in accordance
entetration requiremental				

Renee Savage

Print

Ticket Administrator

Comment: _

Clear

FPPC Form 802 (2/2016) FPPC Toll-Free Helpline: B66/ASK-FPPC (866/275-3772)

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document California 1. Agency Name Date Stamp Form Oakland Alameda County Coliseum Authority For Official Use Only Division, Department, or Region (if applicable) 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 Date of Original Filing: __ (month, day, year) 2. Function or Event Information Does the agency have a ticket policy? Face Value of Each Ticket/Pass \$. Yes No 🗆 Event Description: Soul II Soul

Yes ☐ No ☐

Provide Title/ Explanation

Ticket(s)/Pass(es) provided by agency?

of agency official?

with the requirements.

Comment:

Recipients

Was ticket distribution made at the behest Yes No 🗆

A. Name of Agency, Department or Unit	Number of Ticket(s)/ Passes	Describe the public purpose made pursuant to the agency's poli	
B. Name of Individual (Lest, First)	Number of Ticket(s)/ Passes	Identify one of the following:	
Jenkins, Kevin		Ceremonial Role Other Income	
Serimina, Nevin		to promote the Coliseum Complex to maximize revenues	
		Ceremonial Role Other Income	
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	

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

If no:

If yes: Jenkins, Kevin

Name of Source

Official's Name (Last, First)

Renee Savage

131,50

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document Date Stamp California 1. Agency Name Form Oakland Alameda County Coliseum Authority For Official Use Only Division, Department, or Region (if applicable) Henry Gardner, Executive Director Designated Agency Contact (Name, Title) ☐ Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: _ rsavage@coliseum.com 510.383.4801 (month, day, year) 2. Function or Event Information 131.50 Face Value of Each Ticket/Pass \$ _ Does the agency have a ticket policy? Date(s) 2 // Event Description: Soul II Soul Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? If no: Yes ☐ No ☐ Name of Source If yes: Baker, Chuck Was ticket distribution made at the behest Yes No 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 Describe the public purpose made pursuant to the agency's policy Name of Agency, Department or Unit of Ticket(s)/ A. Passes Numbar Name of Individual Identify one of the following: of Ticket(s)/ В. (Last, First) Passes Income Other Ceremonial Role If checking "Ceremonial Role" or "Other" describe below: 2 Baker, Chuck to promote Coliseum Complex to maximize revenues Other Income Ceremonial Role 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

Comment: _

I have read and understand FPPC Regulations 18944.1 and 1894	I have verified that the distribution set forth above, is in accordance
with the requirements.	

Renee Savage

Ticket Administrator

2-3-23

Signature of Agency Head or Designes

Print Nam

Title

(month, day, year)