

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

A Public Document

1. Agency Name Oakland Alameda County Coliseum Authority <hr/> Division, Department, or Region <i>(if applicable)</i> Henry Gardner, Executive Director <hr/> Designated Agency Contact <i>(Name, Title)</i> <hr/> <table style="width:100%; border: none;"> <tr> <td style="width:50%; border: none;">Area Code/Phone Number 510.383.4801</td> <td style="width:50%; border: none;">E-mail rsavage@gmail.com</td> </tr> </table>		Area Code/Phone Number 510.383.4801	E-mail rsavage@gmail.com	Date Stamp <input type="checkbox"/> Amendment <i>(Must Provide Explanation in Part 3.)</i> Date of Original Filing: _____ <i>(month, day, year)</i>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="text-align: center;">California Form 802</td> </tr> <tr> <td style="text-align: center; font-size: small;">For Official Use Only</td> </tr> </table>	California Form 802	For Official Use Only
Area Code/Phone Number 510.383.4801	E-mail rsavage@gmail.com						
California Form 802							
For Official Use Only							

2. Function or Event Information

Does the agency have a ticket policy? Yes No Face Value of Each Ticket/Pass \$ _____ 118.75

Event Description: Diljit Dosanjh Date(s) 07 / 29 / 22
Provide Title/ Explanation

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: _____
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 <i>(Last, First)</i>	Number of Ticket(s)/ Passes	Identify one of the following:
Haubert, David	8	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i> to promote coliseum to general public & max revenues
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <i>If checking "Ceremonial Role" or "Other" describe below:</i>
C. Name of Outside Organization <i>(include address and description)</i>	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	Ticket Administrator	7.7.22
Signature of Agency Head or Designee	Print Name	Title	<i>(month, day, year)</i>

Comment: _____

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

A Public Document

1. Agency Name Oakland Alameda County Coliseum Authority		Date Stamp	California Form 802 For Official Use Only
Division, Department, or Region (if applicable) Henry Gardner, Executive Director			
Designated Agency Contact (Name, Title)			
Area Code/Phone Number 510.383.4801	E-mail rsavage@gmail.com	<input type="checkbox"/> 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 \$ 118.75

Event Description: Diljit Dosanjh Date(s) 07 / 29 / 22
Provide Title/ Explanation

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:
Caca, Lori	8	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> to provide opportunities to community groups
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
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 _____ Ticket Administrator _____ 7.7.22 _____
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: _____

**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)		Date Stamp	California Form 802 For Official Use Only
Area Code/Phone Number 510.383.4801	E-mail rsavage@gmail.com		
		<input type="checkbox"/> 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 \$ _____ 123.00

Event Description: Machine Gun Kelly Date(s) 07 / 19 / 22
Provide Title/ Explanation

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:
Spearman, Tiffany	4	Ceremonial Role <input type="checkbox"/> Other <input checked="" type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small> to promote coliseum to general public & max revenues
		Ceremonial Role <input type="checkbox"/> Other <input type="checkbox"/> Income <input type="checkbox"/> <small>If checking "Ceremonial Role" or "Other" describe below:</small>
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 Renee Savage Ticket Administrator 7.7.22
Signature of Agency Head or Designee Print Name Title (month, day, year)

Comment: _____