Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name California 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: rsavage@gmail.com (month, day, year) 2. Function or Event Information 68.00 Does the agency have a ticket policy? Face Value of Each Ticket/Pass \$. Yes No 🗆 Event Description: Disney on Ice 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 Name of Agency, Department or Unit Describe the public purpose made pursuant to the agency's policy A. of Ticket(s)/ Passes

B. Name of Individual (Last, First)	Number of Ticket(s)/ Passes	Identify one of the following:	
Jenkins, Kevin	8	Ceremonial Role Other Income Income 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	

Verification

Comment:

I have read and understand FPP	'C Regulations 1894	4.1 and 18942.	I have verified that the	distribution set forti	h above, is in accordance
with the requirements /					

Renee Savage

Ticket Administrator

Title

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

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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

Minus Wa 41	Renee Savage	Ticket Administrator	2-
Signature of Agency Head or Designee	Print Name	Title	(mc

Comment:

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@gmail.com (month, day, year) 2. Function or Event Information 68.00 Does the agency have a ticket policy? Face Value of Each Ticket/Pass \$ -Yes No 🗆 Event Description: Disney on Ice Date(s) 2 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 I 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 В. of Ticket(s)/ (Last, First) **Passes** Income Ceremonial Role Other | If checking "Ceremonial Role" or "Other" describe below: 4 Sbranti, Tim to promote the Coliseum and generate revenus Income ... Ceremonial Role Other 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)/ (include address and description) **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 with the requirements **Ticket Administrator** Renee Savage Title Comment: _

Agency Report of:

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name California 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 Date of Original Filing: _ 510.383 4801 coliseum, com (month, day, year) 2. Function or Event Information 68.00 Face Value of Each Ticket/Pass \$. Does the agency have a ticket policy? Date(s) 02 24 Event Description: Disney on Ice 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 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 A. of Ticket(s)/ Passes Number Name of Individual B. Identify one of the following: of Ticket(s)/ (Last, First) Passes Ceremonial Role Other Income ... If checking "Ceremonial Role" or "Other" describe below: Boubaker, Monia 16 to provide opportunities to community groups Ceremonial Role Other Income If checking "Ceremonial Role" or "Other" describe below: Boubaker, Monia 10 to provide opportunities to community groups Number Name of Outside Organization Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ (include address and description) **Passes**

Verification

I have read and understand FPPC Regulations 18944.1 and 1894.	2. I have verified that the distribution set forth above	e, is in accordance
with the requirements		Set V
with the requirements Renee Savage	Ticket Administrator	2-9.24

Comment: _