## Agency Report of:

	Agency Name				Date Stamp	California OOC
	Oakland Alameda County Coliseum Authority				Date ofamp	Form 802
	Division, Department, or Reg					For Official Use Only
	Henry Gardner, Executive I	•				
- 5	Designated Agency Contact				-	
	Area Code/Phone Number	E-mail	······································		☐ Amendment (Must F	Provide Explanation in Part 3.)
	510.383.4801	rsavage@coliseum	n.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 \$	1250
	Event Description: Hans Zi				• 50.000	
	Event Description:	Provide Title/ Expla		Date(s) <u>10/03</u>	0/2024	
	Ticket(s)/Pass(es) provided	by agency? Yes	■ No□ I	f no:		
,				Cardna	Name of Source	
	Was ticket distribution made	at the behest Yes	No 🗌	f yes: Gardne	official's Name (Last, First)	
	of agency official?				,	
3.	Recipients					
	Use Section A to identify the agent	ncy's department or unit. •	Use Section B to i	dentify an individu	ual. Use Section C to identif	y an outside organization.
	A. Name of Agency, Depa		Number of Ticket(s)/			suant to the agency's policy
			Passes		o pasiio parpose made par	addit to the agency's policy
	B. Name of Indi		Number of Ticket(s)/		Identify one of the fo	ollowing:
	(Last, Fire	st)	Passes			
	Wesley, Kassim		7	The contract of the contract o	nonial Role Other disting "Ceremonial Role" or "Other" des	Income
	, , , , , , , , , , , , , , , , , , ,				the coliseum and gene	
			<u> </u>	<del> </del>		The state of the s
					onial Role	Income L scribe below:
						× #
	C. Name of Outside Or (include address and		Number of Ticket(s)/ Passes	Describe the	e public purpose made purs	suant to the agency's policy
			1 23343			
			a contract of the contract of			
. \	/erification					
1	have read and understand FPI	PC Regulations 18944.	.1 and 18942. i	have verified ti	hat the distribution set fo	rth above, is in accordance
1						
1	have read and understand FPI	9 Renee Savag			hat the distribution set fo CA Ticket Administrato	

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California Oakland Alameda County Coliseum Authority Form 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 Does the agency have a ticket policy? 125.00 Face Value of Each Ticket/Pass \$ \_ Yes ■ No □ Event Description: Cigarettes After Sex Date(s) 10/05/2024 Provide Title/ Explanation Ticket(s)/Pass(es) provided by agency? Yes ■ No □ If 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 A. of Ticket(s)/ Describe the public purpose made pursuant to the agency's policy Passes Number B. Name of Individual of Ticket(s)/ Identify one of the following: (Last, First) **Passes** Ceremonial Role Other Income \_\_\_ Iglesias, Chris 6 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: 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

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

Javage

**OACCA Ticket Administrator** 

Title

(month, day, year)

Comment: \_

	Agency Name Oakland Alameda County Coliseum Authority Division, Department, or Region (if applicable)					Date Stamp Californi	
						Form	<sup>1ia</sup> 802
Division, Depar						For Off	cial Use Only
-	Henry Gardner, Executive Director						
Designated Age	Designated Agency Contact (Name, Title)						
Area Code/Pho	ne Number	E-mail			Amendment (Mus	st Provide Explanati	on in Part 3.)
510.383.4801		rsavage@colise	um.com		Date of Original Filing	g:(month, day,	vear)
Function or	Event Infor	mation					,,
Does the agen	cy have a ticl	ket policy? Υ	es 🖪 No 🗆 🖟	ace Value of	Each Ticket/Pass \$ .		175.00
Event Descript	ion. Grupo F			Date(s) 10/13			
Event Descript	ION	Provide Title/ E.	xplanation	Jate(s) <u>10/10</u>	72024		
Ticket(s)/Pass(	es) provided	by agency? Ye	es 🔳 No 🔲 📗	f no:			
		2) 1986 1988 - 1861 - 1861 - 186	_	lalasias	Name of Source		
		e at the behest Ye	es 📕 No 🗌 📗	f yes: <u>idlesias.</u>	Chris Official's Name (Last, Firs	et)	
of agency office	cial?				(	-9	
. Recipients							
	identify the agen	ncy's department or unit	. • Use Section B to i	dentify an individu	al. Use Section C to iden	ntify an outside org	ganization.
A. Name	of Agency, Depa	artment or Unit	Number of Ticket(s)/ Passes	Describe the	e public purpose made p	ursuant to the ag	ency's policy
2						The second se	
В.	Name of Indi (Last, Firs		Number of Ticket(s)/ Passes		Identify one of the	e following:	
В.			of Ticket(s)/	Cerem	Identify one of the	_	Income
B.  Iglesias, Chris	(Last, Firs		of Ticket(s)/	3-00-00-00-00-00-00-00-00-00-00-00-00-00			Income
	(Last, Firs		of Ticket(s)/ Passes	If checki	onial Role Other	describe below:	
	(Last, Firs		of Ticket(s)/ Passes	to promote o	onial Role Other	describe below: munity organi	
Iglesias, Chris	(Last, Firs	rganization	of Ticket(s)/ Passes	to promote of Ceremi	onial Role Other ing "Ceremonial Role" or "Other" opportunities to com onial Role Other	describe below: munity organi	zations
Iglesias, Chris	(Last, Firs	rganization	of Ticket(s)/ Passes  16  Number of Ticket(s)/	to promote of Ceremi	onial Role Other ing "Ceremonial Role" or "Other" or opportunities to com onial Role Other ong "Ceremonial Role" or "Other" or	describe below: munity organi	Income
Iglesias, Chris	(Last, Firs	rganization	of Ticket(s)/ Passes  16  Number of Ticket(s)/	to promote of Ceremi	onial Role Other ing "Ceremonial Role" or "Other" or opportunities to com onial Role Other ong "Ceremonial Role" or "Other" or	describe below: munity organi	zations
Iglesias, Chris	(Last, Firs	rganization	of Ticket(s)/ Passes  16  Number of Ticket(s)/	to promote of Ceremi	onial Role Other ing "Ceremonial Role" or "Other" or opportunities to com onial Role Other ong "Ceremonial Role" or "Other" or	describe below: munity organi	zations
Iglesias, Chris  C. Nan (inclu	(Last, First	rganization description)	of Ticket(s)/ Passes  16  Number of Ticket(s)/ Passes	to promote of Cereming If checking the Cereming In the Ceremin	onial Role Other ing "Ceremonial Role" or "Other" or Opportunities to com onial Role Other ong "Ceremonial Role" or "Other" or on onial Role of the company	describe below: munity organi describe below: describe below:	zations Income
Iglesias, Chris  C. Nan (inclu	(Last, First	rganization description)	of Ticket(s)/ Passes  16  Number of Ticket(s)/ Passes	to promote of Cereming If checking the Cereming In the Ceremin	onial Role Other ing "Ceremonial Role" or "Other" or opportunities to com onial Role Other ong "Ceremonial Role" or "Other" or	describe below: munity organi describe below: describe below:	zations Income
Iglesias, Chris  C. Nan (inclusion)  Verification  I have read and use	(Last, First	rganization description)	of Ticket(s)/ Passes  16  Number of Ticket(s)/ Passes	to promote of Ceremilif checking the Ceremilif checking the Ceremilif checking the Ceremilif checking the Ceremilia cereminists and the Cereminists and the Ceremilia cereminists and the Cereminist	onial Role Other ing "Ceremonial Role" or "Other" or Opportunities to com onial Role Other ong "Ceremonial Role" or "Other" or on onial Role of the company	describe below: munity organi describe below: ursuant to the age	zations Income

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

Comment: \_

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions A Public Document 1. Agency Name Date Stamp California Oakland Alameda County Coliseum Authority Form 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 67.50 Does the agency have a ticket policy? Face Value of Each Ticket/Pass \$ \_ Yes ■ No □ Event Description: DOI Date(s) 10/19/2024 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 □ 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 Describe the public purpose made pursuant to the agency's policy of Ticket(s)/ **Passes** Number В. Name of Individual of Ticket(s)/ Identify one of the following: (Last, First) Passes Ceremonial Role Other Income Iglesias, Chris If checking "Ceremonial Role" or "Other" describe below: 4 to promote opportunities to community organizations 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 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 OACCA Ticket Administrator Print Name

Comment:

Title

1. Agency Name				Date Stamp	Public Documen
Oakland Alameda County	Coliseum Authority	Bato Stamp	Form 802		
Division, Department, or Re			· · · · · · · · · · · · · · · · · · ·	-	For Official Use Only
Henry Gardner, Executive					
Designated Agency Contac				-	×
Area Code/Phone Number	E-mail			Amendment (Must P	Provide Explanation in Part 3.)
510.383.4801	rsavage@coliseur	n.com		Date of Original Filing:	(month, day, year)
2. Function or Event Info	ormation		No.		- Control of the Cont
Does the agency have a t	icket policy? Yes	■ No □ F	ace Value of	Each Ticket/Pass \$ _	150.00
Event Description: DOI 3:	00PM		)ate(s)		10/19/2024
	Provide Title/ Expl	anation	zate(3)		10/10/2024
Ticket(s)/Pass(es) provide	ed by agency? Yes	■ No □ I	no:		
Was ticket distribution mad	de at the beheet .v		Gardne	Name of Source r. Henry	
of agency official?	de at the beliest Yes	■ No L	yes: ——	r, Henry Official's Name (Last, First)	
				400	
3. Recipients					=
Use Section A to identify the ag	ency's department or unit.		dentify an individu	ual. Use Section C to identif	y an outside organization.
A. Name of Agency, De	partment or Unit	Number of Ticket(s)/	Describe the public purpose made pursuant to the agency's pol		
	Passes				
1					
		Number			
B. Name of In (Last, F		of Ticket(s)/ Passes		Identify one of the f	ollowing:
	<u> </u>	1 43505	Cerem	nonial Role Other	Income [
Boubaker, Monia		16	****	king "Ceremonial Role" or "Other" de	
			to provide o	pportunities to commu	inity groups
			Cerem	nonial Role Other	lacome [
		1	If check	king "Ceremonial Role" or "Other" des	scribe below:
		Number			
C. Name of Outside (include address ar		of Ticket(s)/	Describe the	e public purpose made pur	suant to the agency's policy
		Passes			
				was a second of the second of	
Verification					
. Verification	PPC Regulations 18944	1 1 and 18942 I	have verified t	hat the distribution set for	orth above is in accordance
<ul> <li>Verification         I have read and understand F         with the requirements.     </li> </ul>	PPC Regulations 18944	1.1 and 18942. I	have verified t	hat the distribution set fo	orth above, is in accordanc
I have read and understand F	PPC Regulations 18944			hat the distribution set fo	

Comment: \_

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

$\stackrel{\smile}{=}$	eremoniai Role Ever	its and lickeur	ass Disti	enonual	Α	Public Document
1.	Agency Name	p.			Date Stamp	California OOO
	Oakland Alameda County Coliseum Authority  Division, Department, or Region (if applicable)					Form 802
						For Official Use Only
	Henry Gardner, Executive I	Director				2
	<b>Designated Agency Contact</b>	(Name, Title)			1	
				90		
	Area Code/Phone Number	E-mail			Amendment (Must Pi	rovide Explanation in Part 3.)
	510.383.4801	rsavage@coliseum	com		Date of Original Fillings	
	0.000.7001	rsavage@conseum	1.00111		Date of Original Filing: _	(month, day, year)
2.	<b>Function or Event Infor</b>	mation				
	Does the agency have a tic	ket policy?	No □	Face Value of	Each Ticket/Pass \$	150.00
			3 00000		72 A 100 A 1	F 25 25 25 25 25 25 25 25 25 25 25 25 25
	Event Description: DOI 3:0	Provide Title/ Expla		Date(s)		10/20/2024
	Ticket(s)/Pass(es) provided			f no.		
	nokel(3)/1 ass(es) provided	by agency? Yes	No 🗆	i no:	Name of Source	
	Was ticket distribution made	e at the behest Voc.	No□!	f yes: Gardne	r, Henry	
	of agency official?	165	INO L	r yes. ———	Official's Name (Last, First)	
3.	Recipients					
	• Use Section A to identify the ager	ncy's department or unit. •	Use Section B to	identify an individu	ual. Use Section C to identify	an outside organization.
			Number			
	A. Name of Agency, Depart	artment or Unit	of Ticket(s)/ Passes	Describe th	ne public purpose made purs	uant to the agency's policy
			1 43363			
				1		
					·	
			l	-		
	B. Name of Indi		Number of Ticket(s)/		Identify one of the fo	llowing:
	(Last, Fir	st)	Passes			
					nonial Role  Other	Income
	Boubaker, Monia		5	If check	king "Ceremonial Role" or "Other" desc	ribe below:
				to provide o	pportunities to commu	nity groups
				Cerem	nonial Role Other	Income
				If check	king "Ceremonial Role" or "Other" desc	The state of the s
	Name of Outside O	rganization	Number			
	C. (include address and		of Ticket(s)/ Passes	Describe the	e public purpose made purs	uant to the agency's policy
			1 43343			
		М.		,		
			A			
1. '	Verification			. 8		
	I have read and understand FP	PC Regulations 18944.	1 and 18942.	I have verified t	hat the distribution set for	th above, is in accordance
	with the requirements.					
•	Lenge Inva	G ( Renee Savag	е	OAC	CA Ticket Administrator	10-18-24
_	Signature of Agency Head or Design	1/	int Name		Title	(month, day, year)
		3				(
	Comment:					

# Agency Report of:

	eremonial Role Ever Agency Name		Date Stamp	Public Documen		
	Oakland Alameda County	Coliseum Authority	Date Stamp	Form 802		
	Division, Department, or Rec		1	For Official Use Only		
	Henry Gardner, Executive I	Director				
	<b>Designated Agency Contact</b>	(Name, Title)	•		1	,
					☐ Amondment (44 )	
	Area Code/Phone Number	E-mail			Amendment (Must )	Provide Explanation in Part 3.)
	510.383.4801	rsavage@coliseur	n.com		Date of Original Filing:	(month, day, year)
2.	Function or Event Infor	mation				
	Does the agency have a tic	ket policy? Yes	■ No□	Face Value of	Each Ticket/Pass \$	
	Event Description: Maxwell					
	Event Description.	Provide Title/ Expla	anation	Date(s) 10/25	12024	
	Ticket(s)/Pass(es) provided	by agency? Yes	■ No 🗆 I	f no:		
	Was ticket distribution made	of the beheat		f yes: Jefferso	Name of Source	
	Was ticket distribution made of agency official?	at the benest Yes	■ No 🗆	f yes:	Official's Name (Last, First)	
2000	a. agoney emelar.					
	Recipients					
	Use Section A to identify the agen	ıcy's department or unit.	Use Section B to i	identify an individι	ıal. Use Section C to identif	y an outside organization.
	A. Name of Agency, Depa	artment or Unit	Number of Ticket(s)/ Passes	Describe th	e public purpose made pur	suant to the agency's policy
	B. Name of Indi	Number of Ticket(s)/		Identific our of the f		
		(Last, First)			Identify one of the fo	
	Jefferson Jamilah		Passes			ollowing:
	Jefferson, Jamilah	st)	Passes	I	onial Role Other	Income [
	Jefferson, Jamilah	st)		If check	ing "Ceremonial Role" or "Other" des	Income C
	Jefferson, Jamilah	st)	Passes	to promote t	ing "Ceremonial Role" or "Other" des the Coliseum and gen	I Income Cocribe below:
	Jefferson, Jamilah	st)	Passes	to promote t	ing "Ceremonial Role" or "Other" des he Coliseum and gen	Income corribe below: erate revenues
	C Name of Outside Or	rganization	Passes	to promote to Ceremif check	ing "Ceremonial Role" or "Other" des the Coliseum and gen onial Role  Other on "Other" des ong "Ceremonial Role" or "Other" des	Income Corribe below:  erate revenues  Income Corribe below:
		rganization	Passes 4	to promote to Ceremif check	ing "Ceremonial Role" or "Other" des the Coliseum and gen onial Role  Other on "Other" des ong "Ceremonial Role" or "Other" des	Income corribe below: erate revenues
	C Name of Outside Or	rganization	Passes  4  Number of Ticket(s)/	to promote to Ceremif check	ing "Ceremonial Role" or "Other" des the Coliseum and gen onial Role  Other on "Other" des ong "Ceremonial Role" or "Other" des	I Income Corribe below:  erate revenues  Income Corribe below:
	C Name of Outside Or	rganization	Passes  4  Number of Ticket(s)/	to promote to Ceremif check	ing "Ceremonial Role" or "Other" des the Coliseum and gen onial Role  Other on "Other" des ong "Ceremonial Role" or "Other" des	I Income Corribe below: erate revenues I Income Corribe below:
	C Name of Outside Or	rganization	Passes  4  Number of Ticket(s)/	to promote to Ceremif check	ing "Ceremonial Role" or "Other" des the Coliseum and gen onial Role  Other on "Other" des ong "Ceremonial Role" or "Other" des	I Income Corribe below:  erate revenues  Income Corribe below:
i	C. Name of Outside Or (include address and	rganization description)	Passes  4  Number of Ticket(s)/ Passes	to promote to Cerem If checks  Describe the	ing "Ceremonial Role" or "Other" des	I Income Corribe below: erate revenues I Income Corribe below: suant to the agency's policy
i	C. Name of Outside Or (include address and	rganization description)	Number of Ticket(s)/ Passes	to promote to Cerem If checks  Describe the	ing "Ceremonial Role" or "Other" des	I Income Corribe below: erate revenues I Income Corribe below: suant to the agency's policy

Print

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

1.	Agency Name				Date Stamp	California OOO		
	Oakland Alameda County C	Coliseum Authority		Form 802				
	Division, Department, or Reg			For Official Use Only				
	Henry Gardner, Executive D	Director						
	Designated Agency Contact					· ·		
		,						
	Area Code/Phone Number	E-mail			Amendment (Must P	rovide Explanation in Part 3.)		
	510.383.4801	rsavage@coliseum			Date of Original Fillians			
		13avage@collseum	i.COIII		Date of Original Filing:	(month, day, year)		
2.	Function or Event Infor	mation				3		
	Does the agency have a ticl	ket policy?	No □	Face Value of I	Each Ticket/Pass \$	150.00		
	Event Description: Maxwell	Provide Title/ Explai	notion	Date(s)		10/25/2024		
	Ticket(s)/Pass(es) provided			f no:				
	monot(o)/i doo(oo) providod	by agoncy: 1es			Name of Course			
	Was ticket distribution made	at the behest Yes	№П	f yes: Gardner	r, Henry	P		
	of agency official?			,	Official's Name (Last, First)			
3.	Recipients							
	Use Section A to identify the agen	cy's department or unit. •	Use Section B to	identify an individu	al. Use Section C to identify	y an outside organization.		
	A. Name of Agency, Depa	rtment or Unit	Number of Ticket(s)/	Describe the public purpose made pursuant to the agency's poli-				
			Passes	Describe (iii	e public purpose made purs	suant to the agency's policy		
				Ī				
						- N		
				1				
	B. Name of Indi	vidual	Number	Identify one of the following:				
	(Last, Firs		of Ticket(s)/ Passes		identity one of the fo	ollowing:		
		9		Ceremo	onial Role  Other	Income		
	Savage, Lauren		4		ing "Ceremonial Role" or "Other" des			
	1 .			to promote t	he coliseum aqnd gen	erate revenues		
				Ceremo	onial Role Other	Income		
				AND ADDRESS OF THE PARTY OF THE	ing "Ceremonial Role" or "Other" des			
	Name of Outside Or	ganization	Number					
	C. (include address and		of Ticket(s)/ Passes	Describe the	public purpose made purs	uant to the agency's policy		
						2013		
					ä			
- 3	Varification			<u> </u>				
	Verification							
1	I have read and understand FPI with the requirements.	<sup>2</sup> C Regulations 18944.	1 and 18942.	I have verified th	nat the distribution set for	rth above, is in accordance		
/	Donos Donas	/ Poppe Course	•	0400	NA Tiplest A 1 - 1 - 1 - 1 - 1	21.201		
9	auce way	Renee Savage		OACC	CA Ticket Administrato	10-21-24		
	Signature of Agency Head or Designe	ee Pri	nt Name		Title	(month, day, year)		

4				-		4 1		
4.	- 14	$\Delta$	rı	4:	-	ati	-	n
<b>-</b>	·	•			u	26	u	

Comment: \_

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

Ceremonial Role Events and Ticket/Pass Distributions				Α	<b>Public Document</b>
1. Agency Name		Date Stamp	0.116		
Oakland Alameda County (	Coliseum Authority		Form 802		
Division, Department, or Rec	jion (if applicable)		For Official Use Only		
Henry Gardner, Executive [	Director				
<b>Designated Agency Contact</b>			**		
Area Code/Phone Number	E-mail			☐ Amendment (Must F	Provide Explanation in Part 3.)
510.383.4801				Date of Original Filing:	
				- a o. og	(month, day, year)
2. Function or Event Infor					450.00
Does the agency have a tic		No □ F	Face Value of I	Each Ticket/Pass \$	150.00
Event Description: Maxwell	Concert	Γ	Date(s)		10/25/2024
	Provide Title/ Explana	tion	Jaic(3)		10/20/2021
Ticket(s)/Pass(es) provided	by agency? Yes	Name of Source			
	Conduc				
Was ticket distribution made	e at the behest Yes	No 🔲 📗	f yes: <u>Gardner</u>	Official's Name (Last, First)	
of agency official?				(,,	
3. Recipients					
Use Section A to identify the ager	ncy's department or unit. • Us	al. Use Section C to identif	y an outside organization.		
A. Name of Agency, Depart	artment or Unit	Number of Ticket(s)/ Passes	Describe the	e public purpose made pur	suant to the agency's policy
-					
B. Name of Indi	vidual	Number of Ticket(s)/		Identify one of the fo	Nowing:
(Last, Fir	st)	Passes	100		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Cardray Taylor		0	20.0	onial Role Other Other	
Gardner, Taylor		6	I	ing "Ceremonial Role" or "Other" des	
-		-	to promote t	he coliseum aqnd ger	erate revenues
				onial Role Other on "Other" des	· · · · · · · · · · · · · · · · · · ·
C. Name of Outside O	Number of Ticket(s)/ Passes	Describe the	public purpose made purs	suant to the agency's policy	
. Verification					
I have read and understand FP with the requirements	2-11	and 18942. i			-1-0/
Service UN	Renee Savage		OACC	CA Ticket Administrato	r 10-21-24
Signature of Agency Head or Design	ee / Print	Name		Title	(month, day, year)
Comment:					

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

**A Public Document** 

1.	Agency Name		Date Stamp	California OOO		
	Oakland Alameda County C	Coliseum Authority		Form OUZ		
	Division, Department, or Reg	jion (if applicable)	*	For Official Use Only		
	Henry Gardner, Executive D	Director				9 a
	<b>Designated Agency Contact</b>	(Name, Title)	*			
	Anna Carla (Diagram Name)				Amendment (Must P	rovide Explanation in Part 3.)
	Area Code/Phone Number 510.383.4801	E-mail			Date of Original Filings	
	310.363.4601	rsavage@coliseum	i.com		Date of Original Filing: .	(month, day, year)
2.	Function or Event Infor	mation				405.00
	Does the agency have a tic	ket policy? Yes	No ☐ F	ace Value of	Each Ticket/Pass \$	125.00
	Event Description: Ana Gat	oriel		Date(s) 10/26	5/2024	
		Provide Title/ Expla	nation			
	Ticket(s)/Pass(es) provided	by agency? Yes	No 🔲 📗	f no:	Name of Source	
	Was ticket distribution made	e at the behest Ves	■ No □ I	f yes: <u>Iglesias</u>	, Chris	
	of agency official?	163	ino 🔲 .	, you	Official's Name (Last, First)	
3.	Recipients	*				- 14 AMERICAN STATE OF THE STAT
J.	• Use Section A to identify the ager	ncy's department or unit. •	Use Section B to i	dentify an individu	ual. Use Section C to identify	y an outside organization.
			Number			-
	A, Name of Agency, Depa	artment or Unit	of Ticket(s)/ Passes	Describe th	e public purpose made purs	suant to the agency's policy
		*				
	B. Name of Indi (Last, Fir		Number of Ticket(s)/ Passes		Identify one of the fo	ollowing:
	·		1 03503	Ceren	nonial Role  Other	Income 🗆
	Iglesias, Chris			1.00.70011111000	king "Ceremonial Role" or "Other" des	
				to provide o	pportunities to commu	nity organizations
				Cerem	nonial Role Other	Income
				If check	king "Ceremonial Role" or "Other" des	cribe below:
			Number			
	C. Name of Outside O (include address and		of Ticket(s)/	Describe th	e public purpose made purs	uant to the agency's policy
			газэез			
	- Control of the Cont					
4.	Verification					
	I have read and understand FP	PC Regulations 18944	.1 and 18942.	I have verified t	hat the distribution set fo	rth above, is in accordance
/	with the requirements	1001				
_	serve ava	Kenee Savag		OAC	CA Ticket Administrato	10-21-24
	Signature of Agency Head or Design	eë P	rint Name		Title	(month, day, year)
	Comment:	*				
	-		·			