FPPC Form 802 (4/12) FPPC Toll-Free Helpline: #66/ASK-FPPC (666/275-7772)

Agency Report or: Ceremonial Role Events and Tic	ket/Pass	Distributions		A Public Documen	nt
1. Agency Name		of many and interpreted on the other property of the last and and an in-	Date Stamp	Sellone Toyaye	H
Oakland Alameda County Goliseum Auth	ority			是的原理。人名	
Division, Department, or Region (II Applicable		For Official Use Only			
Scott Haggerly, OACCA Commissioner					
Designated Agency Contact (Name, Title)			1		
,			Connedment atual	provide explanation in Part 2)	-
Area Code/Phone Number E-mail				Mars 2017	+
510,272.6691 leeann.fergs	rson@acgo	v.org	Date of Original Filing:	(Month, Day, Year)	
2. Function or Event Information		F. 111	/E T //D 0	5,000 312	500
Does the agency have a tickel policy?	Yes 🗵 No	The value of	of Each Ticket/Pass \$ _	7,000 = 15	
Event Description VOVS	and on	Date(s)	1611		
35.5	Į.	If no: G	W .		
Tickel(s)/Pass(es) provided by agency?	Yes 🗵 No		Name of So	nurce	
Was ticket distribution made at the behest	No ☐ Yes	☑ If yes: Hagge	erly, Scott Official's Name (Unit Fig.	
of agency official?	and the sale definition of the sale	Manage accessory of terror Table Politics in product of people	Children white	Cost, Filary	ent.
 Recipients Use Section A to Mantily the agency's department or a 	ınil. » Use Sec	tion B to identify an individu	usl. u Usa Saction C to kien	illy on outside erganization.	
A. Name of Agency, Department or Unit	Number of Ticket(s)i		lic purposa mada pursuani		-
	Fass(as)				_
9			sight of facilities or		
		received count	y funding or suppor	rt –	-
				700 MARKET III	
B. Namo of Individual	Number of Ticket(s)/		Identify one of the fellow	ina:	_
(Lav. F20)	Pass(as)				š
Michael D'Ambrosio	7		e attendance at a co	ounty sponsored	1
11000000 J AMIDIOSO	-		order to maximize p for concession and		delete
					-deplice
		Coremontal Rola [Other of Roinfor Other describe helevi.	Incomo L	1 V
					_
C. Name of Outside Organization (include address and description)	Humber of Ticket(s)/	Describe the publ	ic purpose made pursuant	to the agency's policy	
	Pasa(es)	To Poward a rehool o	or nonprofit organization	a for	-
		Its contributions to the		1101	
		-			
. Verification		Carlotte and the Control of the Cont		The state of the s	•
There lead had understand FPPC Regulations 18941.1 and		12		5/2/17	
Sugantum of Aportar Vivod of Design &	ee Ann Ferg		Supervisors Assistant	(identii, Day: Yevr)	•
Comment:					•

Agency Report of: Ceremonial Role Events and Ticket/Pass Distributions 1. Agency Name Oakland Alameda County Coliseum Authority Division Department or Region (if applicable)

A	Pι	ldı	ic	D	oc	ur	n	eı	1	t
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1.	Agency Name		Colonia de la colonia de l		Date Stamp	California OAA
	Oakland Alameda County C	oliseum Authority			·	Form もしと
	Division, Department, or Reg		1	For Official Use Only		
	Ignacio De La Fuente, OAC	CA Commissioner				
	Designated Agency Contact	(Name, Title)				
	Area Code/Phone Number	E-mail				Provide Explanation in Part 3.)
	510.383.4801	idelafuente2012@g	mail.com		Date of Original Filing:	May 2017
<u></u>	Function or Event Infor	mation				(month, day, year)
L.						12 50
	Does the agency have a tick	, , , , , , , , , , , ,	⊠ No 🔲 📑	-ace Value of I	Each Ticket/Pass \$ $\frac{3}{2}$	12.00
	Event Description: Warriors	Season 2016-2017		Date(s)		
	Ticket(s)/Pass(es) provided	Provide Title/Explai		f		
	ricket(s)/Fass(es) provided	by agency? Yes [KI NO L	I 110	Name of Source	
	Was ticket distribution made	at the behest Yes F		f yes:	Official's Name (Last, First)	
	of agency official?				Official's Name (Last, First)	
3.	• Use Section A to identify the agen A. Name of Agency, Depart		Use Section B to Number of Ticket(s)/ Passes			tify an outside organization. 'suant to the agency's policy
	B. Name of India (Last, Firs		Number of Ticket(s)/ Passes		Identify one of the f	ollowing:
	De La Fuente, Ignacio		2 per	If checks error: origina	onial Role Other Ding "Ceremonial Role" or "Other" de Illy reported as 4 ticke iickets per game	
			game	ì	onial Role Other on "Other" de	
	C. Name of Outside Or (include address and		Number of Ticket(s)/ Passes	Describe the	public purpose made pur	suant to the agency's policy
,	Verification					
1	I have read and understand FPI with the requirements.	PC Regulations 18944.	1 and 18942. i	have verified th	nat the distribution set fo	orth above, is in accordance
	Koney	AMUM Rener	e Savage	OAC	CCA Executive Assista	ant 2.23.18
partition of the last of the l	Signature of Agency Head or Designe		nt Name		Title	(month, day, year)
	0	V				
	Comment:					

AMENDMENT DATE: February 2018

Ignacio De La Fuente

Golden State Warriors

Playoffs May 2017

•	Warriors v Jazz	5.2.17	(2) tickets	\$312.50
•	Warriors v Jazz	5.4.17	(2) tickets	\$312.50
•	Warriors v Spurs	5.14.17	(2) tickets	\$312.50
•	Warriors v Spurs	5.16.17	(2) tickets	\$312.50

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

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1.	Agency Name			Date Stamp	California Ong		
	Oakland Alameda County Coliseum Authority				Form OUZ		
	Division, Department, or Region (if applicable)				For Official Use Only		
	Sabrina Landreth, City Administrator						
	Designated Agency Contact (Name, Title)						
	Renee Savage, OACCA Executive Assistant / Ti	cket Adminis	trator	Amendment (Must Pro	vide Evalenation in Boot 2.)		
	Area Code/Phone Number E-mail						
	510.383.4801			Date of Original Filing: N	(month, day, year)		
2.	Function or Event Information						
	Does the agency have a ticket policy? Yes	⊠ No□ F	ace Value of I	Each Ticket/Pass \$ 312	2.50		
	Event Description: Warriors Playoffs 2017		Date(s)05				
	Provide Title/ Expla.	nation	Date(s)		//		
			f no:	Name of Source			
				Name of Source			
	Was ticket distribution made at the behest Yes [□ No⊠ ^I	f yes:	Official's Name (Last, First)			
	of agency official?			, , , , , , , , , , , , , , , , , , , ,			
3.	Recipients						
٥.	• Use Section A to identify the agency's department or unit.	Use Section B to	identify an individ	ual. • Use Section C to identif	y an outside organization.		
		Number		and a second second second	y an outside organization.		
	A. Name of Agency, Department or Unit	of Ticket(s)/ Passes	Describe the	e public purpose made pursu	ant to the agency's policy		
		1 200					
	1		†				
	No.	Number					
	B. Name of Individual (Last, First)	of Ticket(s)/ Passes		Identify one of the fol	lowing:		
	Landreth, Susan Sabluna		Cerem	Ceremonial Role Other X Income			
	Landreth, Susan 2017001	2	It checking "Ceremonial Role" or "Other" describe below: to investigate efficiencies of operations of various sporting				
		_		e efficiencies of operation ents that occur at Colis			
				onial Role Other	Income \(\precedent		
				ing "Ceremonial Role" or "Other" descr			
			NOT	POSTED)			
	Name of Outside Organization	Number					
	C. (include address and description)	of Ticket(s)/ Passes	Describe the	e public purpose made pursu	ant to the agency's policy		
4.	Verification						
	I have read and understand FPPC Regulations 18944	1 and 18942	I have verified t	hat the distribution set fort	th above is in accordance		
_	with the requirements			rat the distribution sot fort	ir abovo, io iir accordanico		
	LONIO CAIMIN Rene	e Savage	OAO	CCA Ticket Administrato	or March 2018		
		int 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 Form Oakland/Alameda County Coliseum Authority For Official Use Only Division, Department, or Region (if applicable) **OACCA** Commissioner Designated Agency Contact (Name, Title) Lee Ann Fergerson, Ticket Administrator Amendment (Must Provide Explanation in Part 3.) Area Code/Phone Number E-mail Date of Original Filing: 510-272-6691 leeann.fergerson@acgov.org (month, day, year) 2. Function or Event Information Face Value of Each Ticket/Pass \$ 312.50 Does the agency have a ticket policy? Yes ⊠ No □ Event Description: Warriors Date(s) __5 / 16 / Provide Title/ Explanation If no: GSW Ticket(s)/Pass(es) provided by agency? Yes ⊠ No □ Name of Source If yes: Haggerty, Scott 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 Name of Individual of Ticket(s)/ Passes B. Identify one of the following: (Last, First) To promote attendance at a county sponsored Miranda, Josh event in order to maximize potential county 2 revenue for concession and parking sales. ceremonial Kole L Other L Income If checking "Ceremonial Role" or "Other" describe below: NOT POSTED 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

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

Lee Ann Fergerson Signature of Agency Head or Designee

Ticket Administrator

3/12/18

Comment:

Print Name

Title

(month, day, year)

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

A Public Document

1. Agency Name			Date Stamp	California 802
Oakland Alameda County Coliseum Authority		Form OUZ		
Division, Department, or Region (if applicable)		For Official Use Only		
Susan Muranishi, County Administrator				
Designated Agency Contact (Name, Title)				
Renee Savage, OACCA Executive Assistant / 1	icket Adminis	trator	Amendment (Must Pro	ovide Explanation in Part 3.)
Area Code/Phone Number E-mail				100 M
510.383.4801			Date of Original Filing:	(month, day, year)
2. Function or Event Information				
Does the agency have a ticket policy? Yes	⊠ No □ F	ace Value of	Each Ticket/Pass \$ 31	2.50
Event Description: Warriors Finals 2017				
Provide Title/ Expl	anation	Jale(s)	/	
Ticket(s)/Pass(es) provided by agency? Yes	⊠ No □	f no:	Name of Source	
Was ticket distribution made at the behest Yes	□ No 🗵	f yes:	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 individ	ual. • Use Section C to identi	fy an outside organization.
A. Name of Agency, Department or Unit	Number of Ticket(s)/	Describe th	e public purpose made purs	uant to the agency's policy
	Passes			
	ļ	ļ		
	Number			
B. Name of Individual (Last, First)	of Ticket(s)/ Passes		Identify one of the fo	llowing:
Muranishi, Susan			nonial Role Other X	Income
Waramoni, Gasan	2 per	to investigate	ing "Ceremonial Role" or "Other" desc e efficiencies of operati	ons of various sporting
			ents that occur at Colis	
		Cerem	nonial Role Other	Income
	game		king "Ceremonial Role" or "Other" desc	ribe below:
		1/0	1 HOSTED	
C. Name of Outside Organization (include address and description)	Number of Ticket(s)/ Passes	Describe the	e public purpose made purs	uant to the agency's policy
	100			
		ľ		
4. Verification		-		
I have read and understand FPPC Regulations 1894	4.1 and 18942.	I have verified t	that the distribution set for	th above, is in accordance
with the requirements.				
CHALL SAMMIC Ren	ee Savage	OAG	CCA Ticket Administrat	or March 2018
	Print Name		Title	(month, day, year)
Comment:				

Warriors Finals

2017

Amended 802 form

Susan Muranishi

•	Warriors v Cavs	6.1.17	2 tickets
	Warriors v Cavs	6.4.17	2 tickets
	Warriors v Cavs	6.12.17	2 tickets