



City of Anaheim
Office of the City Clerk

RECEIVED: September 6, 2019

By City of Anaheim - Office of the City Clerk

Please submit completed form(s) to:

Mail or in person: Office of the City Clerk

200 S. Anaheim Blvd. Ste. 217, Anaheim, CA 92805; or

Email: tbass@anaheim.net; or Fax: (714) 765-4105

LOBBYIST'S QUARTERLY REPORT OF ACTIVITY

CHECK APPLICABLE REPORTING PERIOD:

Q1: Due April 30 (January 1 - March 31)
 Q2: Due July 31 (April 1 - June 30)

Q3: Due October 31 (July 1 - September 30)
 Q4: Due January 31 (October 1 - December 31)

PART I – LOBBYIST INFORMATION

| | | | |
|--------------------------------------|--------------|---------------------------------------|----------|
| NAME OF LOBBYIST (Last, First, M.I.) | | NAME OF LOBBYING FIRM (if applicable) | |
| GREYSHOCK, STEVE M. | | GREYCOMM, LLC | |
| BUSINESS EMAIL | | BUSINESS PHONE (XXX) XXX-XXXX | |
| STEVE@GREY-COMM.COM | | 714-330-0321 | |
| BUSINESS ADDRESS | CITY | STATE | ZIP CODE |
| 27702 CROWN VALLEY PARKWAY D4-334 | LADERA RANCH | CA | 92694 |

PART II – REPORTING SCHEDULES

Note: Check all applicable.

| | | |
|--|--|--|
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| No Lobbying Activity | Lobbying Activity/Client Disclosure Report | Campaign Contribution Report |
| I did not participate or engage in any form of lobbying during the reporting period. | <u>Schedule C</u> : Report any form of lobbying by the lobbying firm/lobbyist of the City of Anaheim or any regional agency in which Anaheim has a voting role during this reporting period. (Attach Schedule C) | <u>Schedule D</u> : Report any contributions made during the reporting period to the Mayor or any City Council Member by the lobbying firm/lobbyist. (Attach Schedule D) |

Verification

I certify that I have reviewed Ordinance No. 6417, made available on the City of Anaheim's website and reviewed all applicable lobbying provisions. I declare under penalty of perjury under the laws of the State of California that the information contained herein is true and accurate to the best of my knowledge.

| | |
|---------------------------------------|------------------------|
| SIGNATURE OF LOBBYIST | PRINT NAME OF LOBBYIST |
| | STEVE GREYSHOCK |
| NAME OF LOBBYING FIRM (if applicable) | DATE |
| GREYCOMM, LLC | 9/6/2019 |



CLIENT DISCLOSURE – SCHEDULE C

CHECK APPLICABLE REPORTING PERIOD:

Q1: Due April 30 (January 1 - March 31)
 Q2: Due July 31 (April 1 - June 30)

Q3: Due October 31 (July 1 - September 30)
 Q4: Due January 31 (October 1 - December 31)

Note: Complete this form for **each client** in which five hundred dollars (\$500) or more was received in a calendar month. This form may be duplicated for additional entries.

| | | | | | |
|------------------------------------|--|-----------------|---|-------------------------------|------------|
| PART I – CLIENT INFORMATION | | | Total Compensation Lobbyist Received from Client: | | \$1,500.00 |
| NAME OF CLIENT (Last, First, M.I.) | | BUSINESS NAME | | BUSINESS PHONE (XXX) XXX-XXXX | |
| KIM, ROBERT | | 6509 SERRANO LP | | 714-658-6299 | |
| BUSINESS ADDRESS | | CITY | | STATE | ZIP CODE |
| 1600 DOVE ST. | | NEWPORT BEACH | | CA | 92660 |

PART II – CLIENT DISCLOSURE

SECTION A. Describe the local legislative or administrative action(s) that the lobbying firm/lobbyist supported or opposed during the reporting period.

LAND USE CONSIDERATIONS

SECTION B. Disclose any form of communication by the lobbying firm/lobbyist during the reporting period. Use a separate entry for each new contact.

| 1. DATE OF CONTACT | NAME & TITLE OF CITY OFFICIAL OR STAFF CONTACTED | NAME OF LOBBYIST |
|-------------------------------------|--|------------------|
| 6/13/19 | Chris Zapata, David Belmer | Steve Greyshock |
| DESCRIBE PURPOSE OF MEETING: | | |
| Provide project update and briefing | | |
| 2. DATE OF CONTACT | NAME & TITLE OF CITY OFFICIAL OR STAFF CONTACTED | NAME OF LOBBYIST |
| | | |
| DESCRIBE PURPOSE OF MEETING: | | |
| 3. DATE OF CONTACT | NAME & TITLE OF CITY OFFICIAL OR STAFF CONTACTED | NAME OF LOBBYIST |
| | | |
| DESCRIBE PURPOSE OF MEETING: | | |
| 4. DATE OF CONTACT | NAME & TITLE OF CITY OFFICIAL OR STAFF CONTACTED | NAME OF LOBBYIST |
| | | |
| DESCRIBE PURPOSE OF MEETING: | | |

If more space is needed for Part II, Section B. – Client Disclosure, check box and attach additional pages.