

RECEIVED: May 3, 2019

By City of Anaheim 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				tober 31 (July 1		
Q2: Due July 31 (April 1 - Jul	ne 30)	Q4	: Due Jan	uary 31 (Octob	er 1 - Decen	nber 31)
PART I – LOBBYIST INFORMATIO	N					
NAME OF LOBBYIST (Last, First, M.I.)			NAME OF	LOBBYING FIRM (if applicable)
Steven			Greysł	nock		
BUSINESS EMAIL				BUSINESS PHON	IE (XXX) XXX	-XXXX
steve@grey-comm.com				(714) 658-	6299	
BUSINESS ADDRESS		CITY			STATE	ZIP CODE
1600 Dove St.		Newpor	t Beac	h	CA	92669
PART II — REPORTING SCHEDULI Note: Check all applicable.	ES					
					~	
No Lobbying Activity	Lobbying Activit	y/Client Di	sclosure	Campai	gn Contril	oution Report
		eport				
I did not participate or engage in any	Schedule C: Report any form of		Schedule D: Report any contributions			
form of lobbying during the reporting	lobbying by th	, ,	-			orting period to
period.	lobbyist of the Ci	-	-			/ City Council
	regional agency in	n which Ana	aheim has	. Men	nber by th	e lobbying
	a voting role du	ıring this re	porting		firm/lobb	oyist.
	period. (Att	ach Schedu	le C)	(A	ttach Sch	edule 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
Freven fl. Fragst	Steve Greyshock
NAME OF LOBBYING FIRM (if applicable)	DATE
GREYCOMM, LLC	4/30/2019



Firm) Name:	GREYCOMM,	LLC	
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CLIENT DISCLOSURE – SCHEDULE C

CHECK APPLICABLE REPORTING PERIOD: Q1: Due April 30 (January 1 - March 31) Q2: Due July 31 (April 1 - June 30) Q4: Due January 31 (October 1 - December 31)							
· ·	n for each client in which five e duplicated for additional e			500) or more was	received	l in a calendar	
PART I – CLIENT INFORMATION				Total Compensation L Received from Client:		\$1,450	
NAME OF CLIENT (Last, First,	M.I.)	BUSINESS NAME				PHONE (XXX) XXX-XXXX	
		Kim			(714) 658-6299		
BUSINESS ADDRESS		CITY			STATE	ZIP CODE	
1600 Dove St.			Newport Beach		CA	92669	
PART II – CLIENT DI	SCLOSURE						
	cal legislative or administrative act	ion(s) tl	hat the lobbying fi	rm/lobbyist supported	or oppose	ed during the reporting	
period.							
Land use entitlemen	ts						
CECTION B. Diviler and for		··· - 6····	. / - - - - - - - - - - - - -	d			
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 OF		F CONTACTED	NAME OF LOBBYIST			
3/22	Mayor Harry Sidhu			Steve Greyshock			
DESCRIBE PURPOSE OF MEETING:							
Update on project	ct status and review	pro	cess				
2. DATE OF CONTACT	NAME & TITLE OF CITY OFFICIAL OR STAFF CONTACTE		F CONTACTED	NAME OF LOBBYIST			
3/22 Councilman Trevor O'N		eil	Steve Greyshock				
DESCRIBE PURPOSE OF MEETING:							
Update on project status and review process							
3. DATE OF CONTACT	NAME & TITLE OF CITY OFFICIAL OR ST		AFF CONTACTED NAME OF LOBBYIST				
DESCRIBE PURPOSE OF MEETING:							
4. DATE OF CONTACT	NAME & TITLE OF CITY OFFICIAL OR STAFF O		F CONTACTED	NAME OF LOBBYIST			
DESCRIBE PURPOSE OF MEET	ING:						
If more space is peeded	for Part II, Section B. – Client Disclo	curo ch	ack how and attac	h additional pages			
I i more space is needed	ior raitii, section b. – Chent Discio	suie, ci	IECK DOX ALIA ALIAC	n additional pages.			



Firm) Name: GREYCOMM, LLC)
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CAMPAIGN CONTRIBUTIONS – SCHEDULE D

			NTRIBUTIONS	
Discl	ose all campaign DATE	contributions b	by the lobbying firm/lobbyist during the reporting NAME OF CONTRIBUTION RECIPIENT	period. NAME OF LOBBYIST
1.		\$250	Mayor Harry Sidhu	Steve Greyshock
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