



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)	
Voss, Dirk		URBAN MANAGEMENT STRATEGIES	
BUSINESS EMAIL		BUSINESS PHONE (XXX) XXX-XXXX	
umSDIRK@gmail.com		909-730-2773	
BUSINESS ADDRESS	CITY	STATE	ZIP CODE
12561 SKYLINE DRIVE	DORSET HOT SPRINGS	CA	92240

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.	Schedule C: 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)	Schedule D: 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
	DIRK VOSS
NAME OF LOBBYING FIRM (if applicable)	DATE
URBAN MANAGEMENT STRATEGIES	1/31/19



City of Anaheim
Office of the City Clerk

(Firm) Name: _____

CLIENT DISCLOSURE – SCHEDULE C

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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:	
NAME OF CLIENT (Last, First, M.I.)	BUSINESS NAME	BUSINESS PHONE (XXX) XXX-XXXX		
Zachary, Jeremy	Good Coast Investments	56-556-8131		
BUSINESS ADDRESS	CITY	STATE	ZIP CODE	
3131 CAPWELL DRIVE	OAKLAND	CA	94621	

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.

Business Development

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
	OCT. 21, 2018	Mayor Pro-Tem Jose Moreno	DIRK VOSS
DESCRIBE PURPOSE OF MEETING:			
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.