

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 Q2: Due July 31 (April 1 - Jur	- March 31) Q3: Due Octo	Q3: Due October 31 (July 1 - September 30) Q4: Due January 31 (October 1 - December 31)			
PART I – LOBBYIST INFORMATIO	N				
NAME OF LOBBYIST (Last, First, M.I.)	NAME OF L	OBBYING FIRM (if applicable)			
Pringle, Katie	Curt Pringle & Associates				
BUSINESS EMAIL	BUSINESS PHONE (XXX) XXX-XXXX				
katie@curtpringle.com	7	714-939-9070			
BUSINESS ADDRESS	СПҮ	STATE ZIP CODE			
1801 E Katella Ave Suite 1002	Anaheim	CA 92805			
PART II — REPORTING SCHEDULE Note: Check all applicable.	ES .				
	<b>✓</b>				
No Lobbying Activity	Lobbying Activity/Client Disclosure Report	Campaign Contribution Report			
I <b>did not</b> participate or engage in <b>any form of lobbying</b> 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)	made during the reporting period any the Mayor or any City Council has Member by the lobbying			
Verification					
I certify that I have reviewed Ordinand all applicable lobbying provisions. I de the information contained herein is to	clare under penalty of perjury under	the laws of the State of California tha			
SIGNATURE OF LOBBYIST	PRINT NAME OF LOBBYIS	T-			
204-610	Katie Pringle	Katie Pringle			
NAME OF LOBBYING FIRM (if applicable)	DATE				

[2183] [1]



(Firm) Name: Curt Pringle & Associates

## CLIENT DISCLOSURE - SCHEDULE C

	DRTING PERIOD: pril 30 (January 1 - March 31) Ily 31 (April 1 - June 30)		ue October 31 (July 1 - Septe ue January 31 (October 1 - D	
	n for <b>each client</b> in which f e duplicated for additional		500) or more was receive	d in a calendar
PART I – CLIENT IN	FORMATION		Total Compensation Lobbyist Received from Client:	\$10,000.00
NAME OF CLIENT (Last, First,	M.i.)	BUSINESS NAME	BUSINES	SS PHONE (XXX) XXX-XXXX
Miranda, Bryan		Public Storage	714-3	38-1262
BUSINESS ADDRESS		CITY	STATI	E ZIP CODE
701 Western Aven	ue	Glendale	CA	91201
PART II – CLIENT DI	SCLOSURE			
SECTION A. Describe the location period.	cal legislative or administrative a	ction(s) that the lobbying fi	rm/lobbyist supported or oppos	sed during the reporting
	mit Approval - Plannin	a Commission		
Conditional Ose r er	mit Approvar - manimi	g Commission		
SECTION B. Disclose any for each	orm of communication by the lob new contact.	bying firm/lobbyist during	the reporting period. Use a sepa	nrate
1. DATE OF CONTACT	NAME & TITLE OF CITY OFFICIAL	OR STAFF CONTACTED	NAME OF LOBBYIST	
7/1/2018	Kimberly Keys, Planni	ng Commissioner	Katie Pringle	
DESCRIBE PURPOSE OF MEET	ING:			
Email corresponde	ence re: item 3, July	9 Planning Com	mission Meeting	
2. DATE OF CONTACT	NAME & TITLE OF CITY OFFICIAL	OR STAFF CONTACTED	NAME OF LOBBYIST	
7/2/2018 DESCRIBE PURPOSE OF MEET	Steve White, Plannir	ng Commissioner	Katie Pringle	
Email corresponde	ence re: item 3, July	9 Planning Com	mission Meeting	
3. DATE OF CONTACT	NAME & TITLE OF CITY OFFICIAL	L OR STAFF CONTACTED	NAME OF LOBBYIST	
7/2/2018	Jess Carbajal, Planni	ng Commissioner	Katie Pringle	
DESCRIBE PURPOSE OF MEET	ING:			
Email corresponde	ence re: item 3, July	9 Planning Com	mission Meeting	
4. DATE OF CONTACT	NAME & TITLE OF CITY OFFICIAL	OR STAFF CONTACTED	NAME OF LOBBYIST	
7/3/2018	Kimberly Keys, Plann	ing Commissioner	Katie Pringle	
DESCRIBE PURPOSE OF MEET	ING:	-		
Email corresponde	ence re: item 3, July	9 Planning Com	mission Meeting	1121141111
✓ If more space is needed	for Part II, Section B. – Client Disc	closure, check box and attac	ch additional pages.	



## CLIENT DISCLOSURE – SCHEDULE C

	ORTING PERIOD:  upril 30 (January 1 - March 31)  uly 31 (April 1 - June 30)		ue October 31 (July 1 - Septemue January 31 (October 1 - De	
· ·	m for <b>each client</b> in which fiv e duplicated for additional e		500) or more was received	in a calendar
PART I – CLIENT IN	FORMATION		Total Compensation Lobbyist Received from Client:	\$10,000.00
NAME OF CLIENT (Last, First,	M.I.)	BUSINESS NAME		PHONE (XXX) XXX-XXXX
Miranda, Bryan		Public Storage	714-33	8-1262
BUSINESS ADDRESS		CITY	STATE	ZIP CODE
701 Western Aven	ue	Glendale	CA	91201
PART II - CLIENT DI	SCLOSURE			
SECTION A. Describe the loperiod.	cal legislative or administrative act	ion(s) that the lobbying fi	rm/lobbyist supported or opposed	d during the reporting
Conditional Use Per	mit Approval - Planning	Commission		
	orm of communication by the lobb	ying firm/lobbyist during t	the reporting period. Use a separa	ate
entry for each  1. DATE OF CONTACT	new contact.  NAME & TITLE OF CITY OFFICIAL (	OR STAFF CONTACTED	NAME OF LOBBYIST	
7/3/2018	Kimberly Keys, Plannin			
DESCRIBE PURPOSE OF MEET		.9		
Brief on item 3 of	July 9 Planning Comr	nission Meeting	requesting a condition	onal use permit
2. DATE OF CONTACT	NAME & TITLE OF CITY OFFICIAL (	OR STAFF CONTACTED	NAME OF LOBBYIST	
7/6/2018	Steve White, Planning	g Commissioner	Katie Pringle	
DESCRIBE PURPOSE OF MEET	TING:			
Email corresponde	ence re: item 3, July 9	Planning Com	mission Meeting	
3. DATE OF CONTACT	NAME & TITLE OF CITY OFFICIAL (	OR STAFF CONTACTED	NAME OF LOBBYIST	
7/6/2018  DESCRIBE PURPOSE OF MEET	Jess Carbajal, Plannin ˈɪng:	g Commissioner	Katie Pringle	
Email corresponde	ence re: item 3, July 9	Planning Comr	mission Meeting	
4. DATE OF CONTACT	NAME & TITLE OF CITY OFFICIAL (	OR STAFF CONTACTED	NAME OF LOBBYIST	
7/6/2018	Kimberly Keys, Plannir	ng Commissioner	Katie Pringle	
DESCRIBE PURPOSE OF MEET	ING:			
Email corresponde	ence re: item 3, July 9	Planning Com	mission Meeting	
If more space is peeded	for Part II Section R Client Discle	ocure check how and attac	th additional pages	



(Firm) Name:	Curt	Pringle	&	Associates
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## CLIENT DISCLOSURE – SCHEDULE C

	DRTING PERIOD: pril 30 (January 1 - March 31) uly 31 (April 1 - June 30)	=	ue October 31 (July 1 - Septe ue January 31 (October 1 - D	
	n for <b>each client</b> in which e duplicated for additional		500) or more was receive	d in a calendar
PART I – CLIENT IN	FORMATION		Total Compensation Lobbyist Received from Client:	\$10,000.00
NAME OF CLIENT (Last, First,	M.I.)	BUSINESS NAME	BUSINES	SS PHONE (XXX) XXX-XXXX
Miranda, Bryan			714-338-1262	
BUSINESS ADDRESS		CITY	STATI	
701 Western Aven	ue	Glendale	CA	91201
PART II – CLIENT DI	SCLOSURE			
SECTION A. Describe the looperiod.	cal legislative or administrative a	action(s) that the lobbying f	rm/lobbyist supported or oppos	sed during the reporting
	mit Approval - Plannir	na Commission		
Conditional Ose Fer	Till Approval - Flamili	ig Commission		
SECTION B. Disclose any fo	orm of communication by the lol	bbying firm/lobbyist during	the reporting period. Use a sepa	arate
entry for each	new contact.			
1. DATE OF CONTACT	NAME & TITLE OF CITY OFFICIA		NAME OF LOBBYIST	
7/6/2018	John Armstrong, Plan	ning Commissioner	Katle Pringle	
DESCRIBE PURPOSE OF MEET		O Dianning Com	mission Mostina	
	ence re: item 3, July			
2. DATE OF CONTACT	NAME & TITLE OF CITY OFFICIA		NAME OF LOBBYIST	
7/6/2018 DESCRIBE PURPOSE OF MEET	John Gillepsie, Planr	ling Commissioner	Kalle Pringle	
	ence re: item 3, July	9 Planning Com	mission Meeting	
3. DATE OF CONTACT	NAME & TITLE OF CITY OFFICIA		NAME OF LOBBYIST	
7/6/2018	Bill Dalati, Planning		Katie Pringle	
DESCRIBE PURPOSE OF MEET		Commissioner	Natie Filligie	
	ence re: item 3, July	9 Planning Com	mission Meeting	
4. DATE OF CONTACT	NAME & TITLE OF CITY OFFICIA		NAME OF LOBBYIST	
7/6/2018				
DESCRIBE PURPOSE OF MEET	Michelle Lieberman, Pla	anning Commissioner	Ratie Filligie	
	ence re: item 3, July	9 Planning Com	mission Meeting	
	onoc ro. Itom o, July	5 7 laming Com	Thiosion Modeling	
If more space is needed	for Part II, Section B. – Client Dis	closure, check box and attac	ch additional pages.	