

Calendar Year
2021

CITY OF SAN DIEGO

LOBBYING FIRM REGISTRATION FORM [Form EC-601]

For Official Use Only

E-Filed
03/24/2021
11:53:55
Filing ID:
200102517

Lobbyists Added: _____ 0

Clients Added: _____ 0

Fees Due: \$ _____ 0.00

Check Box if an Amendment (explain: Remove prior clients. Add new clients)

Total Number of Pages: 17 (including cover sheet)

Identify the Firm.

PPR Solutions, Inc.			
Name of Lobbying Firm		Telephone Number	
Business Address (Number & Street)		City	State Zip
		San Diego	CA 92101

Schedule A: Lobbyist Disclosure. Complete this schedule by identifying each individual in the firm who has lobbied the City during the 30 days prior to registration, or is expected to lobby the City during the year.

Schedule B: Client Disclosure. Complete this schedule by identifying each client for whom the firm provides lobbying services.

Schedule C: Activities Disclosure. Complete this schedule if any "Yes" boxes are checked.

Check box if the firm has information to report regarding the applicable activity.
 Check box if the firm has no information to report regarding the applicable activity.

YES	NO	You MUST check one box for each part of Schedule C.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	Part 1: Fundraising Activities. Owners, compensated officers, and lobbyists who engaged in "fundraising activities" for the benefit of a current elected City Official within the last two years.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Part 2: Campaign Services. Owners, compensated officers, and lobbyists who provided compensated campaign services to an elected City Official within the last two years.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Part 3: Contract Services. Owners, compensated officers, and lobbyists who provided compensated services under a City contract within the last two years.

Schedule D: Deleting Clients & Lobbyists (Amendment Only). Complete this schedule if removing clients or lobbyists from your registration (must check the amendment box above).

VERIFICATION

I have been authorized by the Lobbying Firm identified above to make this verification. I have reviewed and understand the requirements of the Lobbying Ordinance (San Diego Municipal Code §§ 27.4001-27.4055). I have exercised reasonable diligence in the course of reviewing this Registration Form for completeness and accuracy. I declare under penalty of perjury under the laws of the State of California that the contents of this Registration Form, including all attached schedules, are true, correct, and complete, except as to those matters which are stated on information and belief, and as to those matters I believe them to be true.

Executed on 03/24/2021 at San Diego, CA
(Date) (City and State)

By: _____ Phil Rath _____ President
(Signature) (Print Name) (Title)

Email address for a point of contact within the firm (optional): _____

Registration terminates every January 5; annual re-registration is required.

SCHEDULE A: LOBBYIST DISCLOSURE

Name of Lobbying Firm: PPR Solutions, Inc.

Identify the Firm's Lobbyists. List the name of each individual in the firm who has lobbied City Officials during the 30 days prior to registration, or is expected to lobby City Officials during the year.

Name of Individual

Name of individual

Phil Rath

Comments: _____

If more space is needed, check box and attach continuation sheet(s).

SCHEDULE B: CLIENT DISCLOSURE

Name of Lobbying Firm: PPR Solutions, Inc.

CLIENT'S NAME: <u>Vulcan Materials Co., Western Division</u>		Telephone No.: _____	
Client's Address	(Number & Street)	<u>San Diego</u>	<u>CA</u> <u>92121</u>
		(City)	(State) (Zip)
Nature and Purpose of Client's Business: <u>Concrete and aggregate materials.</u>			
Specific or General Municipal Decisions (see instructions): <u>Stone Creek Master Plan for Carrol Canyon Mining</u> <u>Operation property at Carrol Canyon Road and Black Mountain Road.</u>			
Outcome(s) sought: <u>Approval of Master Plan</u>			
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions): _____ _____ _____			

CLIENT'S NAME: _____		Telephone No.: _____	
Client's Address	(Number & Street)	(City)	(State) (Zip)
Nature and Purpose of Client's Business: _____			
Specific or General Municipal Decisions (see instructions): _____			
Outcome(s) sought: _____			
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions): _____ _____ _____			

Comments: _____

If more space is needed, check box and attach continuation sheet(s).

SCHEDULE B: CLIENT DISCLOSURE

Name of Lobbying Firm: PPR Solutions, Inc.

CLIENT'S NAME: <u>United Medical Marijuana Coalition</u>		Telephone No.: _____	
Client's Address	(Number & Street)	<u>San Diego</u>	<u>CA</u> <u>92101</u>
		(City)	(State) (Zip)
Nature and Purpose of Client's Business: <u>Advocacy for and monitoring of issues related to safe and responsible access to medical and recreational marijuana</u>			
Specific or General Municipal Decisions (see instructions): <u>Monitor City decisions that could impact medicinal and recreational marijuana.</u>			
Outcome(s) sought: <u>Monitor.</u>			
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):			
<u>Tony Hall San Diego, CA 92121</u>			
<u>Will Senn San Diego, CA 92110</u>			
<u>George Diaz San Diego, CA 92110</u>			
(continued next box)			

CLIENT'S NAME: <u>United Medical Marijuana Coalition</u>		Telephone No.: _____	
Client's Address	(Number & Street)	<u>San Diego</u>	<u>CA</u> <u>92101</u>
		(City)	(State) (Zip)
Nature and Purpose of Client's Business: _____			
Specific or General Municipal Decisions (see instructions): <u>Monitor City decisions that could impact medicinal and recreational marijuana.</u>			
Outcome(s) sought: _____			
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):			
<u>Jim Dickinson San Diego, CA 92108</u>			
<u>Alex Scherer San Diego, CA 92173</u>			
<u>Rocky Goyal San Diego, CA 92111</u>			
(continued next box)			

Comments: _____

If more space is needed, check box and attach continuation sheet(s).

SCHEDULE B: CLIENT DISCLOSURE

Name of Lobbying Firm: PPR Solutions, Inc.

CLIENT'S NAME: <u>United Medical Marijuana Coalition</u>		Telephone No.:		
Client's Address	(Number & Street)	(City)	(State)	(Zip)
Nature and Purpose of Client's Business: _____				
Specific or General Municipal Decisions (see instructions): <u>Monitor City decisions that could impact medicinal and recreational marijuana.</u>				
Outcome(s) sought: _____				
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):				
<u>Adam Knopf San Diego, CA 92110</u>				
<u>Aaron Magagna San Diego, CA 92114</u>				

CLIENT'S NAME: <u>United Medical Marijuana Coalition</u>		Telephone No.:		
Client's Address	(Number & Street)	<u>San Diego</u> (City)	<u>CA</u> (State)	<u>92101</u> (Zip)
Nature and Purpose of Client's Business: <u>Advocacy for and monitoring of issues related to safe and responsible access to medical and recreational marijuana</u>				
Specific or General Municipal Decisions (see instructions): <u>City actions to create Cannabis Business Improvement District</u>				
Outcome(s) sought: <u>City authorization to form district and approval of district.</u>				
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):				
<u>Tony Hall San Diego, CA 92121</u>				
<u>Will Senn San Diego, CA 92110</u>				
<u>George Diaz San Diego, CA 92110</u>				

(continued next box)

Comments: _____

If more space is needed, check box and attach continuation sheet(s).

SCHEDULE B: CLIENT DISCLOSURE

Name of Lobbying Firm: PPR Solutions, Inc.

CLIENT'S NAME: <u>United Medical Marijuana Coalition</u>		Telephone No.: _____		
Client's Address	(Number & Street)	(City)	(State)	(Zip)
Nature and Purpose of Client's Business: _____				
Specific or General Municipal Decisions (see instructions): <u>City actions to create Cannabis Business Improvement District</u>				
Outcome(s) sought: _____				
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):				
<u>Jim Dickinson San Diego, CA 92108</u>				
<u>Alex Scherer San Diego, CA 92173</u>				
<u>Rocky Goyal San Diego, CA 92111</u>				
(continued next box)				

CLIENT'S NAME: <u>United Medical Marijuana Coalition</u>		Telephone No.: _____		
Client's Address	(Number & Street)	(City)	(State)	(Zip)
Nature and Purpose of Client's Business: _____				
Specific or General Municipal Decisions (see instructions): <u>City actions to create Cannabis Business Improvement District</u>				
Outcome(s) sought: _____				
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):				
<u>Adam Knopf San Diego, CA 92110</u>				
<u>Aaron Magagna San Diego, CA 92114</u>				

Comments: _____

If more space is needed, check box and attach continuation sheet(s).

SCHEDULE B: CLIENT DISCLOSURE

Name of Lobbying Firm: PPR Solutions, Inc.

CLIENT'S NAME: <u>Lennar</u>		Telephone No.:		
Client's Address	(Number & Street)	<u>San Diego</u>	<u>CA</u>	<u>92127</u>
		(City)	(State)	(Zip)
Nature and Purpose of Client's Business: <u>Real Estate Development, Home Building</u>				
Specific or General Municipal Decisions (see instructions): <u>Land Use Entitlements, Community Plan Amendment, and Rezone for The Junipers, a development project on the property formerly known as the Carmel Highlands/Hotel Karlan Golf Course in Rancho Penasquitos.</u>				
Outcome(s) sought: <u>Approval of Community Plan Amendment, rezone, and land use entitlements.</u>				
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):				

CLIENT'S NAME: _____		Telephone No.:		
Client's Address	(Number & Street)	(City)	(State)	(Zip)
Nature and Purpose of Client's Business: _____				
Specific or General Municipal Decisions (see instructions): _____				
Outcome(s) sought: _____				
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):				

Comments: _____

If more space is needed, check box and attach continuation sheet(s).

SCHEDULE B: CLIENT DISCLOSURE

Name of Lobbying Firm: PPR Solutions, Inc.

CLIENT'S NAME: <u>Will Senn</u>		Telephone No.: _____	
Client's Address	(Number & Street)	<u>San Diego</u>	<u>CA</u> <u>92110</u>
		(City)	(State) (Zip)
Nature and Purpose of Client's Business: <u>Marijuana Production and Retail Facilities</u>			
Specific or General Municipal Decisions (see instructions): <u>Conditional Use Permit for Marijuana Outlet for the property at 16375 Bernardo Center Drive, San Diego, CA 92128</u>			
Outcome(s) sought: <u>Approval of Conditional Use Permit</u>			
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions): _____ _____ _____			

CLIENT'S NAME: <u>Will Senn</u>		Telephone No.: _____	
Client's Address	(Number & Street)	<u>San Diego</u>	<u>CA</u> <u>92110</u>
		(City)	(State) (Zip)
Nature and Purpose of Client's Business: <u>Marijuana Production and Retail Facilities</u>			
Specific or General Municipal Decisions (see instructions): <u>Conditional Use Permits for cannabis retail and production at 1028 Buenos Ave., San Diego, CA 92110</u>			
Outcome(s) sought: <u>Approval of Conditional Use Permits</u>			
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions): _____ _____ _____			

Comments: _____

If more space is needed, check box and attach continuation sheet(s).

SCHEDULE B: CLIENT DISCLOSURE

Name of Lobbying Firm: PPR Solutions, Inc.

CLIENT'S NAME: <u>Will Senn</u>		Telephone No.:		
Client's Address	(Number & Street)	<u>San Diego</u>	<u>CA</u>	<u>92110</u>
		(City)	(State)	(Zip)
Nature and Purpose of Client's Business: <u>Marijuana Production and Retail Facilities</u>				
Specific or General Municipal Decisions (see instructions): <u>N/A</u>				
Outcome(s) sought: <u>N/A</u>				
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):				

CLIENT'S NAME:		Telephone No.:		
Client's Address	(Number & Street)	(City)	(State)	(Zip)
Nature and Purpose of Client's Business:				
Specific or General Municipal Decisions (see instructions):				
Outcome(s) sought:				
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):				

Comments: _____

If more space is needed, check box and attach continuation sheet(s).

SCHEDULE B: CLIENT DISCLOSURE

Name of Lobbying Firm: PPR Solutions, Inc.

CLIENT'S NAME: <u>HP Investors</u>		Telephone No.: _____		
Client's Address	(Number & Street)	<u>San Diego</u>	<u>CA</u>	<u>92101</u>
		(City)	(State)	(Zip)
Nature and Purpose of Client's Business: <u>Real Estate Developer</u>				
Specific or General Municipal Decisions (see instructions): <u>Rezone light industrial property to commercial/mixed use in Mira Mesa Community Plan Update</u>				
Outcome(s) sought: <u>Assist client with rezone of light industrial to commercial/mixed use, and removal of prime industrial designation for properties located at 9474 Black Mountain Road, San Diego, CA 92126.</u>				
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions): _____ _____ _____				

CLIENT'S NAME: _____		Telephone No.: _____		
Client's Address	(Number & Street)	(City)	(State)	(Zip)
Nature and Purpose of Client's Business: _____				
Specific or General Municipal Decisions (see instructions): _____				
Outcome(s) sought: _____				
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions): _____ _____ _____				

Comments: _____

If more space is needed, check box and attach continuation sheet(s).

SCHEDULE B: CLIENT DISCLOSURE

Name of Lobbying Firm: PPR Solutions, Inc.

CLIENT'S NAME: <u>Andy Hirmez</u>		Telephone No.:		
Client's Address	(Number & Street)	<u>El Cajon</u>	<u>CA</u>	<u>92019</u>
		(City)	(State)	(Zip)
Nature and Purpose of Client's Business: <u>Cannabis Retailer</u>				
Specific or General Municipal Decisions (see instructions): <u>Approval of Marijuana Outlet Conditional Use Permit at 2605 Camino del Rio South, San Diego, CA 92108</u>				
Outcome(s) sought: <u>Approval of Conditional Use Permit</u>				
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):				

CLIENT'S NAME: _____		Telephone No.:		
Client's Address	(Number & Street)	(City)	(State)	(Zip)
Nature and Purpose of Client's Business: _____				
Specific or General Municipal Decisions (see instructions): _____				
Outcome(s) sought: _____				
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):				

Comments: _____

If more space is needed, check box and attach continuation sheet(s).

SCHEDULE B: CLIENT DISCLOSURE

Name of Lobbying Firm: PPR Solutions, Inc.

CLIENT'S NAME: <u>Torrey Holistics</u>		Telephone No.: _____		
Client's Address	(Number & Street)	<u>San Diego</u>	<u>CA</u>	<u>92121</u>
		(City)	(State)	(Zip)
Nature and Purpose of Client's Business: <u>Cannabis retail and production.</u>				
Specific or General Municipal Decisions (see instructions): <u>Cannabis Outlet and Production Facility Conditional Use Permits at 10671 Roselle Street, San Diego, CA 92121</u>				
Outcome(s) sought: <u>Approval of extension and/or amendment of Conditional Use Permits</u>				
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions): _____ _____ _____				

CLIENT'S NAME: _____		Telephone No.: _____		
Client's Address	(Number & Street)	(City)	(State)	(Zip)
Nature and Purpose of Client's Business: _____				
Specific or General Municipal Decisions (see instructions): _____				
Outcome(s) sought: _____				
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions): _____ _____ _____				

Comments: _____

If more space is needed, check box and attach continuation sheet(s).

SCHEDULE B: CLIENT DISCLOSURE

Name of Lobbying Firm: PPR Solutions, Inc.

CLIENT'S NAME: <u>Bakery Sorrento, Inc.</u>		Telephone No.:		
Client's Address	(Number & Street)	<u>Newport Beach</u>	<u>CA</u>	<u>92660</u>
		(City)	(State)	(Zip)
Nature and Purpose of Client's Business: <u>Cannabis Retail</u>				
Specific or General Municipal Decisions (see instructions): <u>Cannabis Outlet Conditional Use Permit located at</u> <u>11330 Sorrento Valley Road, San Diego, CA 92121</u>				
Outcome(s) sought: <u>Approval of Cannabis Outlet Conditional Use Permit</u>				
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):				

CLIENT'S NAME: _____		Telephone No.:		
Client's Address	(Number & Street)	(City)	(State)	(Zip)
Nature and Purpose of Client's Business: _____				
Specific or General Municipal Decisions (see instructions): _____				
Outcome(s) sought: _____				
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):				

Comments: _____

If more space is needed, check box and attach continuation sheet(s).

SCHEDULE C: ACTIVITIES DISCLOSURE

Name of Lobbying Firm: PPR Solutions, Inc.

PART 1 – FUNDRAISING ACTIVITIES

Identify Fundraising Activities. List each owner, compensated officer, and lobbyist in the firm who engaged in “fundraising activities” for a current elected City Official or a committee primarily formed to support a current elected City Official within the last two years*, along with the name of the City Official.

<u>Name of Individual</u>		<u>Name of Current Elected City Official</u>
<u>Phil Rath</u>	fundraised for:	<u>Todd Gloria</u>
<u>Phil Rath</u>	fundraised for:	<u>Mara Elliott</u>
<u>Phil Rath</u>	fundraised for:	<u>Joe Lacava</u>
<u>Phil Rath</u>	fundraised for:	<u>Jen Campbell</u>

PART 2 – CAMPAIGN SERVICES

Identify Campaign Services. List each owner, compensated officer, and lobbyist in the firm who provided compensated campaign-related services to a current elected City Official within the last two years*, along with the name of the City Official. (Note that compensation includes “win bonuses.”)

<u>Name of Individual</u>		<u>Name of Current Elected City Official</u>
_____	worked for:	_____
_____	worked for:	_____
_____	worked for:	_____
_____	worked for:	_____

PART 3 – CONTRACT SERVICES

Identify Contract Services. List each owner, compensated officer, and lobbyist in the firm who provided compensated services under a City employment or consultant contract within the past two years*.

<u>Name of Individual</u>		<u>Name of City Department, Agency, or Board</u>
_____	worked for:	_____
_____	worked for:	_____
_____	worked for:	_____
_____	worked for:	_____

* The two year period is based on when the firm registers, except that when filing an amendment to add a new owner, compensated officer, or lobbyist the two year period for the added person is based on the date of the amendment.

Comments: _____

If more space is needed, check box and attach continuation sheet(s).

SCHEDULE C: ACTIVITIES DISCLOSURE

Name of Lobbying Firm: PPR Solutions, Inc.

PART 1 – FUNDRAISING ACTIVITIES

Identify Fundraising Activities. List each owner, compensated officer, and lobbyist in the firm who engaged in “fundraising activities” for a current elected City Official or a committee primarily formed to support a current elected City Official within the last two years*, along with the name of the City Official.

<u>Name of Individual</u>		<u>Name of Current Elected City Official</u>
<u>Phil Rath</u>	fundraised for:	<u>Stephen Whitburn</u>
<u>Phil Rath</u>	fundraised for:	<u>Monica Montgomery</u>
<u>Phil Rath</u>	fundraised for:	<u>Marni Von Wilpert</u>
<u>Phil Rath</u>	fundraised for:	<u>Chris Cate</u>

PART 2 – CAMPAIGN SERVICES

Identify Campaign Services. List each owner, compensated officer, and lobbyist in the firm who provided compensated campaign-related services to a current elected City Official within the last two years*, along with the name of the City Official. (Note that compensation includes “win bonuses.”)

<u>Name of Individual</u>		<u>Name of Current Elected City Official</u>
_____	worked for:	_____
_____	worked for:	_____
_____	worked for:	_____
_____	worked for:	_____

PART 3 – CONTRACT SERVICES

Identify Contract Services. List each owner, compensated officer, and lobbyist in the firm who provided compensated services under a City employment or consultant contract within the past two years*.

<u>Name of Individual</u>		<u>Name of City Department, Agency, or Board</u>
_____	worked for:	_____
_____	worked for:	_____
_____	worked for:	_____
_____	worked for:	_____

* The two year period is based on when the firm registers, except that when filing an amendment to add a new owner, compensated officer, or lobbyist the two year period for the added person is based on the date of the amendment.

Comments: _____

If more space is needed, check box and attach continuation sheet(s).

SCHEDULE C: ACTIVITIES DISCLOSURE

Name of Lobbying Firm: PPR Solutions, Inc.

PART 1 – FUNDRAISING ACTIVITIES

Identify Fundraising Activities. List each owner, compensated officer, and lobbyist in the firm who engaged in “fundraising activities” for a current elected City Official or a committee primarily formed to support a current elected City Official within the last two years*, along with the name of the City Official.

<u>Name of Individual</u>		<u>Name of Current Elected City Official</u>
<u>Phil Rath</u>	fundraised for:	<u>Raul Campillo</u>
<u>Phil Rath</u>	fundraised for:	<u>Vivian Moreno</u>
<u>Phil Rath</u>	fundraised for:	<u>Sean Elo-Rivera</u>
_____	fundraised for:	_____

PART 2 – CAMPAIGN SERVICES

Identify Campaign Services. List each owner, compensated officer, and lobbyist in the firm who provided compensated campaign-related services to a current elected City Official within the last two years*, along with the name of the City Official. (Note that compensation includes “win bonuses.”)

<u>Name of Individual</u>		<u>Name of Current Elected City Official</u>
_____	worked for:	_____
_____	worked for:	_____
_____	worked for:	_____
_____	worked for:	_____

PART 3 – CONTRACT SERVICES

Identify Contract Services. List each owner, compensated officer, and lobbyist in the firm who provided compensated services under a City employment or consultant contract within the past two years*.

<u>Name of Individual</u>		<u>Name of City Department, Agency, or Board</u>
_____	worked for:	_____
_____	worked for:	_____
_____	worked for:	_____
_____	worked for:	_____

* The two year period is based on when the firm registers, except that when filing an amendment to add a new owner, compensated officer, or lobbyist the two year period for the added person is based on the date of the amendment.

Comments: _____

If more space is needed, check box and attach continuation sheet(s).

SCHEDULE D: DELETING CLIENTS & LOBBYISTS (Amendment Only)

Name of Lobbying Firm: PPR Solutions, Inc.

DELETING CLIENTS

Identify in the spaces below the names of any clients previously registered this calendar year for whom you are no longer providing lobbying services, and for whom you do not anticipate providing such services later in the year (be sure to check the "amendment" box on the cover sheet):

<u>Former Client Names</u>	
Doug Gans	
Strainwise	

DELETING LOBBYISTS

Identify in the spaces below the names of any lobbyists previously registered this calendar year who will no longer be lobbying for your firm (be sure to check the "amendment" box on the cover sheet):

<u>Former Lobbyist Names</u>	

Comments: _____

If more space is needed, check box and attach continuation sheet(s).