Calendar Year 2 0 21_

CITY OF SAN DIEGO

LOBBYING FIRM REGISTRATION FORM

[Form EC-601]

X Che	ck Box if a	an Amendment (explain: Remove prior	clients. Add new	Lobbyists Added	d:
clients)	Clients Added:	0
Total Nur	mber of P	ages: <u>17</u> (including cover sheet))	Fees Due: \$	0.00
Identify t	the Firm.				
	lutions, Inc.				
Name o	f Lobbying	Firm	•	ohone Number	
	s Address	(Number & Street)	San Diego (City)	<u>CA</u>	92101 (Zip)
Dusines	S Address	(Number & Street)	(City)	(State)	(Ζιρ)
has lobbi	ed the Cit	<u>byist Disclosure.</u> Complete this scheder of the set	tion, or is expected to lo	obby the City during	ng the year.
Schedu	ile C: Ac	tivities Disclosure. Complete this s	chedule if any "Yes" box	xes are checked.	
		— Check box if the firm has informati	on to report regarding the	applicable activity.	
↓	₩	Check box if the firm has no inform	nation to report regarding t	the applicable activ	vity.
YES	NO	You <u>MUST</u> check one box for ea	ch part of Schedule C.		
\square		Part 1: Fundraising Activities. Own "fundraising activities" for the benefit o			
	\square	Part 2: Campaign Services. Owners compensated campaign services to an			
	\square	Part 3: Contract Services. Owners, compensated services under a City co			ovided
Schedul	e D. Dele	eting Clients & Lobbyists (Amendn	nent Only) Complete t	this schedule if re	movina
		from your registration (must check the			moving
	-	VERIFICA			
the require reasonable penalty of	ements of e diligence perjury un	ed by the Lobbying Firm identified above the Lobbying Ordinance (San Diego Mur in the course of reviewing this Registrat der the laws of the State of California the are true, correct, and complete, except a	nicipal Code §§ 27.4001-2 tion Form for completenes at the contents of this Reg	7.4055). I have exe ss and accuracy. I d istration Form, incli	ercised leclare under uding all

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

Phil Rath

(Print Name)

_____at __San Diego, CA

belief, and as to those matters I believe them to be true.

(Date)

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

(Signature)

Executed on _____03/24/2021

(Title)

President

(City and State)

For Official Use Only

E-Filed 03/24/2021

11:53:55

Filing ID:

SCHEDULE A: LOBBYIST DISCLOSURE

Page 2 of 17

tify the Firm's Lobbyists. List the name of each ng the 30 days prior to registration, or is expected	n individual in the firm who has lobbied City Off
Name of Individual	Name of individual
Name of mulvidual	<u>Name of individual</u>
Phil Rath	

CLIENT'S NAME: Vulcan Materials Co., Western Division	Telepho	ne No.:	
	San Diego	CA	92121
Client's Address (Number & Street)	(City)	(State)	(Zip)
Nature and Purpose of Client's Business: Concrete and aggre	gate materials.		
Specific or Conoral Municipal Decisions (see instructions): Stee	no Crook Magter Dien	for Correl Con	uon Mining
Specific or General Municipal Decisions (see instructions): <u>Stor</u>		TOF CAFFOI CAIL	yon mining
Operation property at Carrol Canyon Road and Black Mountain	n Road.		
Outcome(s) sought: Approval of Master Plan			
· · · · · ·			
If this client is a coalition or membership organization, state the	name, address, and to	elephone numbe	er of each
member of the coalition who has reached the \$1,000 threshold			
OLIENTIO NAME.	Talaalaa	a a Nia a	
CLIENT'S NAME:	Telepho	ne No.:	
CLIENT'S NAME: Client's Address (Number & Street)	(City)	ne No.: (State)	(Zip)
Client's Address (Number & Street)	(City)	(State)	
Client's Address (Number & Street)		(State)	
Client's Address (Number & Street)	(City)	(State)	
Client's Address (Number & Street)	(City)	(State)	
Client's Address (Number & Street) Nature and Purpose of Client's Business:	(City)	(State)	
Client's Address (Number & Street) Nature and Purpose of Client's Business:	(City)	(State)	
Client's Address (Number & Street) Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions):	(City)	(State)	
Client's Address (Number & Street) Nature and Purpose of Client's Business:	(City)	(State)	
Client's Address (Number & Street) Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions):	(City)	(State)	
Client's Address (Number & Street) Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions):	(City)	(State)	
Client's Address (Number & Street) Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions):	(City)	(State)	
Client's Address (Number & Street) 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	(City)	(State)	(Zip)
Client's Address (Number & Street) Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions): Outcome(s) sought:	(City)	(State)	(Zip)
Client's Address (Number & Street) 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	(City)	(State)	(Zip)
Client's Address (Number & Street) 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	(City)	(State)	(Zip)
Client's Address (Number & Street) 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	(City)	(State)	(Zip)
Client's Address (Number & Street) 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	(City)	(State)	(Zip)

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

	Telephone No.:			
	San Diego	CA	92101	
Client's Address (Number & Street)	(City)	(State)	(Zip)	
Nature and Purpose of Client's Business: Advocacy for and	d monitoring of issues	related to safe	and	
responsible access to medical and recreational marijuana				
On altinon Consul Municipal Desiring (see instructions).				
Specific or General Municipal Decisions (see instructions): M	onitor City decisions	that could impa	ct medicinal	
and recreational marijuana.				
Outcome(a) accepts Monitor				
Outcome(s) sought: Monitor.				
If this client is a coalition or membership organization, state the		elephone numbe	er of each	
member of the coalition who has reached the \$1,000 thresho	ld (see instructions):			
Tony Hall San Diego, CA 92121				
Will Senn San Diego, CA 92110				
George Diaz San Diego, CA 92110				
		(conti	nued next bo	
CLIENT'S NAME: United Medical Marijuana Coalition	Telepho	ne No.:		
	(City)	(State)	(Zip)	
Client's Address (Number & Street)				
Client's Address (Number & Street) Nature and Purpose of Client's Business:				
,				
Nature and Purpose of Client's Business:	onitor City degisions	that gould impa	at medicinal	
Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions): M	onitor City decisions	that could impa	ct medicinal	
Nature and Purpose of Client's Business:	onitor City decisions	that could impa	ct medicinal	
Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions): and recreational marijuana.		that could impa	ct medicinal	
Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions): and recreational marijuana.		that could impa	ct medicinal	
Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions): Mand recreational marijuana.		that could impa	ct medicinal	
Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions): and recreational marijuana.		that could impa	ct medicinal	
Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions): and recreational marijuana. Outcome(s) sought: If this client is a coalition or membership organization, state the	he name, address, and t			
Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions): and recreational marijuana. Outcome(s) sought: If this client is a coalition or membership organization, state the member of the coalition who has reached the \$1,000 thresho	he name, address, and t			
Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions): Mand recreational marijuana. Outcome(s) sought: If this client is a coalition or membership organization, state the member of the coalition who has reached the \$1,000 threshous Dim Dickinson San Diego, CA 92108	he name, address, and t			
Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions): and recreational marijuana. Outcome(s) sought: If this client is a coalition or membership organization, state the member of the coalition who has reached the \$1,000 thresho	he name, address, and t			
Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions): Mand recreational marijuana. Outcome(s) sought: If this client is a coalition or membership organization, state the member of the coalition who has reached the \$1,000 threshous Dim Dickinson San Diego, CA 92108	he name, address, and t			

Ν	ame of	f L	.obl	pying	Firm:	PPR	Soluti	ons,	Inc.

CLIENT'S NAME: United Medical Marijuana Coalition		Telephone No.:			
Client's Address	(Number & Street)		(City)	(State)	(Zip)
Nature and Purpose	e of Client's Business:	:			
Specific or General	Municipal Decisions ((see instructions):	Monitor City decision	ns that could impa	ct medicinal
nd recreational ma	arijuana.				
Outcome(s) sought:					
	tion who has reached		the name, address, an old (see instructions):	nd telephone numbe	er of each
Aaron Magagna San	Diego, CA 92114				
	United Medical Marij		San Diego	phone No.:	92101
Client's Address	(Number & Street)		San Diego (City)	CA (State)	92101 (Zip)
Client's Address Nature and Purpose	(Number & Street)	Advocacy for a	San Diego (City) nd monitoring of issue	CA (State)	92101 (Zip)
Client's Address Nature and Purpose	(Number & Street) e of Client's Business: to medical and recr	Advocacy for a	San Diego (City) nd monitoring of issue	CA (State) es related to safe	92101 (Zip)
Client's Address Nature and Purpose responsible access Specific or General	(Number & Street) e of Client's Business: to medical and recr	Advocacy for a	San Diego (City) nd monitoring of issue	CA (State) es related to safe	92101 (Zip)
Client's Address Nature and Purpose responsible access Specific or General District	(Number & Street) e of Client's Business: to medical and recr Municipal Decisions (Advocacy for an reational marijual (see instructions):	San Diego (City) nd monitoring of issue	CA (State) es related to safe	92101 (Zip)
Client's Address Nature and Purpose responsible access Specific or General District	(Number & Street) e of Client's Business: to medical and recr Municipal Decisions (Advocacy for an reational marijual (see instructions):	San Diego (City) and monitoring of issue that City actions to creat	CA (State) es related to safe	92101 (Zip)
Client's Address Nature and Purpose responsible access Specific or General ristrict Dutcome(s) sought:	(Number & Street) e of Client's Business: to medical and recr Municipal Decisions (City authorization	Advocacy for an reational marijual (see instructions):	San Diego (City) and monitoring of issue that City actions to creat	CA (State) es related to safe te Cannabis Busine	92101 (Zip) e and ss Improvement
Client's Address Nature and Purpose responsible access Specific or General District Dutcome(s) sought: If this client is a coal member of the coaling the coali	(Number & Street) e of Client's Business: to medical and recr Municipal Decisions (City authorization lition or membership of the control	Advocacy for an reational marijual (see instructions):	San Diego (City) and monitoring of issue City actions to creat and approval of distr	CA (State) es related to safe te Cannabis Busine	92101 (Zip) e and ss Improvement
Client's Address Nature and Purpose responsible access Specific or General District Outcome(s) sought: If this client is a coal member of the coali	(Number & Street) e of Client's Business: to medical and recr Municipal Decisions (City authorization City authorization Cition or membership of the company of the com	Advocacy for an reational marijual (see instructions):	San Diego (City) and monitoring of issue City actions to creat and approval of distr	CA (State) es related to safe te Cannabis Busine	92101 (Zip) e and ss Improvement

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

CLIENT'S NAME: United Medical Marijuana Coalition	Teleph	one No.:	
Client's Address (Number & Street)	(City)	(State)	(Zip)
Nature and Purpose of Client's Business:			
Specific or General Municipal Decisions (see instructions): City	actions to create	Cannabis Busines	s Improvemen
Outcome(s) sought:			
If this client is a coalition or membership organization, state the member of the coalition who has reached the \$1,000 threshold (Jim Dickinson San Diego, CA 92108 Alex Scherer San Diego, CA 92111		telephone numbe	r of each
Rocky Goyal San Diego, CA 92111			
		(contin	ued next box
CLIENT'S NAME: United Medical Marijuana Coalition	Teleph	one No.:	
CLIENT'S NAME: United Medical Marijuana Coalition Client's Address (Number & Street)	(City)	one No.: (State)	(Zip)
	(City)	(State)	
Client's Address (Number & Street)	(City)	(State)	(Zip)
Client's Address (Number & Street) Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions): City	(City)	(State)	(Zip)
Client's Address (Number & Street) Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions): City District	(City)	(State)	(Zip)
Client's Address (Number & Street) Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions): City District	(City) actions to create	(State) Cannabis Busines	(Zip)
Client's Address (Number & Street) Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions): City District Outcome(s) sought: If this client is a coalition or membership organization, state the member of the coalition who has reached the \$1,000 threshold (Adam Knopf San Diego, CA 92110	(City) actions to create	(State) Cannabis Busines	(Zip)
Client's Address (Number & Street) Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions): city District Outcome(s) sought: If this client is a coalition or membership organization, state the member of the coalition who has reached the \$1,000 threshold (see instructions):	(City) actions to create	(State) Cannabis Busines	(Zip)

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

CLIENT'S NAME: Lennar	Telephone	No.:	
	San Diego	CA	92127
Client's Address (Number & Street)	(City)	(State)	(Zip)
Nature and Purpose of Client's Business: Real Estat	te Development, Home Building		
Specific or General Municipal Decisions (see instruction	ons): Land Use Entitlements, Cor	mmunity Plan	Amendment, and
Rezone for The Junipers, a development project on	the property formerly known as	the Carmel H	Highlands/Hotel
Karlan Golf Course in Rancho Penasquitos.			
Outcome(s) sought: Approval of Community Plan Amen	dment, rezone, and land use ent	titlements.	
If this client is a coalition or membership organization, member of the coalition who has reached the \$1,000 the second s		ephone numb	er of each
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 instruction	ons):		
Outcome(s) sought:			
If this client is a coalition or membership organization, member of the coalition who has reached the \$1,000 the		ephone numb	er of each

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

CLIENT'S NAME: Will Senn	Telephon	e No.:	
	San Diego	CA	92110
Client's Address (Number & Street)	(City)	(State)	(Zip)
Nature and Purpose of Client's Business: Marijuana Prod	duction and Retail Facilit	ies	
Specific or General Municipal Decisions (see instructions): property at 16375 Bernardo Center Drive, San Diego, CA		or Marijuana (Outlet for the
Outcome(s) sought: Approval of Conditional Use Permit			
If this client is a coalition or membership organization, statemember of the coalition who has reached the \$1,000 thres		lephone numb	er of each
CLIENT'S NAME: Will Senn	Telephon	e No.:	
Client's Address (Number & Street)	San Diego (City)	<u>CA</u> (State)	92110 (Zip)
,	duction and Retail Facilit	,	(
Specific or General Municipal Decisions (see instructions):	Conditional Use Permits	for cannabis 1	retail and
production at 1028 Buenos Ave., San Diego, CA 92110			
Outcome(s) sought: Approval of Conditional Use Permits	3		

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

CLIENT'S NAME: Will Senn	Telephon	ne No.:	
	San Diego	CA	92110
Client's Address (Number & Street)	(City)	(State)	(Zip)
Nature and Purpose of Client's Business: _	Marijuana Production and Retail Facilit	ies	
Specific or General Municipal Decisions (see	e instructions): N/A		
Outcome(s) sought: N/A			
If this client is a coalition or membership org member of the coalition who has reached the		elephone numbe	r of each
CLIENT'S NAME:	Telephon	ne No.:	
CLIENT'S NAME: Client's Address (Number & Street)	Telephon (City)	ne No.: (State)	(Zip)
	(City)	(State)	
Client's Address (Number & Street)	(City)	(State)	(Zip)
Client's Address (Number & Street) Nature and Purpose of Client's Business: _ Specific or General Municipal Decisions (see	(City)	(State)	(Zip)
Client's Address (Number & Street) Nature and Purpose of Client's Business: _	(City)	(State)	(Zip)
Client's Address (Number & Street) Nature and Purpose of Client's Business: _ Specific or General Municipal Decisions (see	(City)	(State)	(Zip)
Client's Address (Number & Street) Nature and Purpose of Client's Business: _ Specific or General Municipal Decisions (see	e instructions): anization, state the name, address, and te	(State)	(Zip)
Client's Address (Number & Street) Nature and Purpose of Client's Business: _ Specific or General Municipal Decisions (see Outcome(s) sought:	e instructions): anization, state the name, address, and te	(State)	(Zip)

x 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: HP Investors	Telephon	e No.:	
	San Diego	CA	92101
Client's Address (Number & Street)	(City)	(State)	(Zip)
Nature and Purpose of Client's Business: Real Estate Do	eveloper		
Specific or General Municipal Decisions (see instructions): use in Mira Mesa Community Plan Update	Rezone light industrial p	property to co	ommercial/mixed
Outcome(s) sought: Assist client with rezone of light prime industrial designation for properties located at			
If this client is a coalition or membership organization, statemember of the coalition who has reached the \$1,000 thres		lephone numb	er of each
CLIENT'S NAME:	Telephon	e 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, statemember of the coalition who has reached the \$1,000 thres		lephone numb	er of each

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

CLIENT'S NAME: Andy Hirmez	Telephone No.:		
	El Cajon	CA	92019
Client's Address (Number & Street)	(City)	(State)	(Zip)
		, ,	,
Nature and Purpose of Client's Business: Cannabis Retail			
Specific or General Municipal Decisions (see instructions):	Approval of Marijuana Ou	tlet Condition	al Use Permit
at 2605 Camino del Rio South, San Diego, CA 92108			
Outcome(s) sought: Approval of Conditional Use Permit			
Outcome(s) sought.			
If this client is a coalition or membership organization, state		elephone numbe	er of each
member of the coalition who has reached the \$1,000 thresh	old (see instructions):		
CLIENT'S NAME:	Telephor	ne No.:	
CLIENT'S NAME:	Telephor	ne No.:	
CLIENT'S NAME: Client's Address (Number & Street)	Telephor	ne No.:	(Zip)
Client's Address (Number & Street)	(City)	(State)	
Client's Address (Number & Street)	·	(State)	
Client's Address (Number & Street)	(City)	(State)	
Client's Address (Number & Street)	(City)	(State)	(Zip)
Client's Address (Number & Street) Nature and Purpose of Client's Business:	(City)	(State)	(Zip)
Client's Address (Number & Street) Nature and Purpose of Client's Business:	(City)	(State)	(Zip)
Client's Address (Number & Street) Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions):	(City)	(State)	(Zip)
Client's Address (Number & Street) Nature and Purpose of Client's Business:	(City)	(State)	(Zip)
Client's Address (Number & Street) Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions):	(City)	(State)	(Zip)
Client's Address (Number & Street) Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions):	(City)	(State)	(Zip)
Client's Address (Number & Street) 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	(City)	(State)	(Zip)
Client's Address (Number & Street) Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions): Outcome(s) sought:	(City)	(State)	(Zip)
Client's Address (Number & Street) 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	(City)	(State)	(Zip)
Client's Address (Number & Street) 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	(City)	(State)	(Zip)
Client's Address (Number & Street) 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	(City)	(State)	(Zip)

X 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: Torrey Holistics	Telephone No.:		
	San Diego	CA	92121
Client's Address (Number & Street)	(City)	(State)	(Zip)
Nature and Purpose of Client's Business: Cannabis retail	and production.		
Specific or General Municipal Decisions (see instructions): _ca	annabis Outlet and Prod	luction Facilit	y Conditional
Use Permits at 10671 Roselle Street, San Diego, CA 92121			
Outcome(s) sought: Approval of extension and/or amendment	t of Conditional Use Pe	ermits	
If this client is a coalition or membership organization, state the	ne name, address, and te	elephone numbe	er of each
member of the coalition who has reached the \$1,000 thresho			
CLIENT'S NAME:	Telephoi	ne No.:	
CLIENT'S NAME: Client's Address (Number & Street)	Telephoi (City)	ne No.:(State)	(Zip)
	(City)	(State)	
Client's Address (Number & Street)	(City)	(State)	
Client's Address (Number & Street)	(City)	(State)	(Zip)
Client's Address (Number & Street) Nature and Purpose of Client's Business:	(City)	(State)	(Zip)
Client's Address (Number & Street) Nature and Purpose of Client's Business:	(City)	(State)	(Zip)
Client's Address (Number & Street) Nature and Purpose of Client's Business:	(City)	(State)	(Zip)
Client's Address (Number & Street) Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions):	(City)	(State)	(Zip)
Client's Address (Number & Street) Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions):	(City)	(State)	(Zip)
Client's Address (Number & Street) 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	(City)	(State)	(Zip)
Client's Address (Number & Street) Nature and Purpose of Client's Business: Specific or General Municipal Decisions (see instructions): Outcome(s) sought:	(City)	(State)	(Zip)
Client's Address (Number & Street) 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	(City)	(State)	(Zip)
Client's Address (Number & Street) 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	(City)	(State)	(Zip)
Client's Address (Number & Street) 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	(City)	(State)	(Zip)

X 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: Bakery Sorrento, Inc.	Telephone	e No.:	
	Newport Beach	CA	92660
Client's Address (Number & Street)	(City)	(State)	(Zip)
Nature and Purpose of Client's Business: Cannabis Retainment	il		
Specific or General Municipal Decisions (see instructions):	Cannabis Outlet Conditions	al Use Permit	located at
11330 Sorrento Valley Road, San Diego, CA 92121			
Outcome(s) sought: Approval of Cannabis Outlet Condition	ional Use Permit		
If this client is a coalition or membership organization, statemember of the coalition who has reached the \$1,000 thres		ephone numbe	er of each
CLIENT'S NAME:	Telephone	e 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:			
	e the name, address, and tele	ephone numbe	er of each
If this client is a coalition or membership organization, statemember of the coalition who has reached the \$1,000 thres			

Idantifu Fundualalma Aativitiaa I	ist and summer commonstated officer and labelyist in the firm	lb o
engaged in "fundraising activities" for	ist each owner, compensated officer, and lobbyist in the firm or a current elected City Official or a committee primarily forr	ned to
	al within the last two years*, along with the name of the City	
Name of Individual	Name of Current Elected City Office	<u>ial</u>
Phil Rath	fundraised for:Todd Gloria	
Phil Rath	fundraised for: Mara Elliott	
Phil Rath	fundraised for:Joe_Lacava	
Phil Rath	fundraised for:Jen Campbell	
ART 2 – CAMPAIGN SERVICES		
dentify Campaign Services. List	each owner, compensated officer, and lobbyist in the firm w	no
	elated services to a current elected City Official within the las City Official. (Note that compensation includes "win bonuses	
Name of Individual	Name of Current Elected City Office	ial
	worked for:	
	worked for:	
	worked for: worked for:	
ART 3 – CONTRACT SERVICES		
	worked for: ach owner, compensated officer, and lobbyist in the firm who	provid
dentify Contract Services. List excompensated services under a City	worked for: ach owner, compensated officer, and lobbyist in the firm who employment or consultant contract within the past two years	provid
dentify Contract Services. List e	worked for: ach owner, compensated officer, and lobbyist in the firm who employment or consultant contract within the past two years Name of City Department, Agency, o	provid s*.
dentify Contract Services. List expenses and a City	ach owner, compensated officer, and lobbyist in the firm who employment or consultant contract within the past two years Name of City Department, Agency, o	provida*.
dentify Contract Services. List expense of Individual	ach owner, compensated officer, and lobbyist in the firm who employment or consultant contract within the past two years Name of City Department, Agency, o	provid 5*. r Board
dentify Contract Services. List excompensated services under a City Name of Individual	ach owner, compensated officer, and lobbyist in the firm who employment or consultant contract within the past two years Name of City Department, Agency, o	provid s*. r Board

Form EC-601 (Rev. 10/09/12)

Nome of Laboring Firms		Page 15 of 17
Name of Lobbying Firm:PPR Solutions PART 1 – FUNDRAISING ACTIVITIES	s, mc.	
Identify Fundraising Activities. List each engaged in "fundraising activities" for a cur support a current elected City Official within	rent elected City Of	fficial or a committee primarily formed to
Name of Individual		Name of Current Elected City Official
Phil Rath	fundraised for: _	Stephen Whitburn
Phil Rath	fundraised for: _	Monica Montgomery
Phil Rath	fundraised for: _	Marni Von Wilpert
Phil Rath	fundraised for: _	Chris Cate
PART 2 – CAMPAIGN SERVICES		
Identify Campaign Services. List each or provided compensated campaign-related s years*, along with the name of the City Offi	ervices to a current	t elected City Official within the last two
Name of Individual		Name of Current Elected City Official
	worked for:	
PART 3 – CONTRACT SERVICES		
Identify Contract Services. List each own compensated services under a City employ		officer, and lobbyist in the firm who provided contract within the past two years*.
Name of Individual		Name of City Department, Agency, or Board
	worked for:	
The two year period is based on when the firm r	registers except that	when filing an amendment to add a new owner
compensated officer, or lobbyist the two year peri		
Comments:		

ame of Lobbying Firm:PPR	
ART 1 – FUNDRAISING ACTIVIT	TES
engaged in "fundraising activities"	List each owner, compensated officer, and lobbyist in the firm who for a current elected City Official or a committee primarily formed to cial within the last two years*, along with the name of the City Official.
Name of Individual	Name of Current Elected City Official
Phil Rath	fundraised for:Raul Campillo
Phil Rath	fundraised for:Vivian Moreno
Phil Rath	fundraised for:Sean Elo-Rivera
	fundraised for:
ART 2 – CAMPAIGN SERVICES	
provided compensated campaign-	st each owner, compensated officer, and lobbyist in the firm who related services to a current elected City Official within the last two e City Official. (Note that compensation includes "win bonuses.")
Name of Individual	Name of Current Elected City Official
	worked for:
ART 3 – CONTRACT SERVICES	
dentify Contract Services. List	
dentify Contract Services. List	each owner, compensated officer, and lobbyist in the firm who provide
dentify Contract Services. List compensated services under a Cit	each owner, compensated officer, and lobbyist in the firm who provide ty employment or consultant contract within the past two years*. Name of City Department, Agency, or Board
dentify Contract Services. List compensated services under a Cit	each owner, compensated officer, and lobbyist in the firm who provide ty employment or consultant contract within the past two years*. Name of City Department, Agency, or Board worked for:
dentify Contract Services. List compensated services under a Cit	each owner, compensated officer, and lobbyist in the firm who provide ty employment or consultant contract within the past two years*. Name of City Department, Agency, or Board worked for: worked for:
compensated services under a Cit	each owner, compensated officer, and lobbyist in the firm who provide ty employment or consultant contract within the past two years*. Name of City Department, Agency, or Board worked for:

SCHEDULE D: DELETING CLIENTS & LOBBYISTS (Amendment Only)

me of Lobbying Firm:			
	DELETING	CLIENTS	
e no longer providing lobb		previously registered this calend m you do not anticipate providin the cover sheet):	
	Former Cl	ent Names	
Doug Gans			
Strainwise			
,		,	
	DELETING L	OBBYISTS	
		s previously registered this cale amendment" box on the cover s	
	Former Lob	byist Names	
		,	

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