

Period Covered:

From 04/1/2018

To 06/30/2018

CITY OF SAN DIEGO

LOBBYING FIRM QUARTERLY DISCLOSURE REPORT [Form EC-603]

Court's Ex. 322
Case # 37-2017-10073
Rec'd
Dept 73 Clk
Filing ID: 174292043

Total # of Pages: 7

☒ Check Box if an Amendment (explain: Amendment per Ethics Commission to clarify Lighthouse Strategies activity description)

☐ Check Box if Terminating Status as a Lobbying Firm

Identify the Firm:

Bartell & Associates
Name of Lobbying Firm
Telephone Number
San Diego CA 92108
Business Address (Number & Street) (City) (State) (Zip)

Disclosure Schedules:

Schedule A: Client Disclosure. You must complete Schedule A-1 or A-2 for each registered client.

Check box (and attach schedule) if the firm has activity to report on this schedule for the reporting period.
Check box (do not attach schedule) if the firm has no activity to report on this schedule for the reporting period.

YES	NO	You MUST check one box for each of the following schedules.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Schedule B: Activity Expenses. Activity expenses made during the reporting period.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Schedule C: Candidate Contributions. Contributions of \$100 or more made to support or oppose a City candidate during the reporting period.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Schedule D: Ballot Measure Contributions. Contributions of \$100 or more made to a City candidate-controlled ballot measure committee during the reporting period.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Schedule E: Fundraising Activities. Fundraising activities by owners, officers, and lobbyists in the amount of \$2,000 or more during the reporting period.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Schedule F: Campaign Services. Paid campaign-related services personally provided by owners, officers, and lobbyists during the reporting period.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	Schedule G: City Contract Services. Paid services personally provided by owners, officers, and lobbyists under a City contract during the reporting period.

VERIFICATION

I have been authorized by the Lobbying Firm identified above to make this verification. I have exercised reasonable diligence in the course of reviewing this Quarterly Disclosure Report for completeness and accuracy. I declare under penalty of perjury under the laws of the State of California that the contents of this Quarterly Disclosure Report, 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 10/16/2018 at San Diego, CA
(Date) (City and State)
By: Adrian Kwiatkowski Vice President
(Signature) (Print Name) (Title)

SCHEDULE A-1: CLIENT DISCLOSURE (Lobbying Contacts) Page 2 of 7

Name of Lobbying Firm: Bartell & Associates

Fill out a Schedule A-1 for each client for whom the firm had at least one lobbying contact during the reporting period.
Fill out a separate Schedule A-1 for each decision lobbied on by the firm for the client.

NAME OF CLIENT: <u>1122 4th Ave LLC</u>		Telephone No.: _____	
_____		<u>San Francisco</u>	<u>CA</u>
Client's Address	(Number & Street)	(City)	(State) <u>94107</u> (Zip)
TOTAL COMPENSATION for all decisions lobbied on for the client, to the nearest \$1,000: \$ <u>1,000.00</u>			
<input type="checkbox"/> Check this box if the firm lobbied for this client on a contingency basis during the reporting period.			

MUNICIPAL DECISION (per Registration, plus specifics if necessary): <u>Development of California Theater</u> <u>property at 1122 4th Ave, San Diego, CA 92101; Development of California Theater property at 1122 4th Ave.</u>	
A. Outcome Sought (per Registration, plus specifics if necessary): <u>Completion of development; Approval and</u> <u>issuance of permits for development of 1122 4th Ave., San Diego, CA 92101</u>	
B. Name of each Lobbyist in the firm who lobbied City Officials regarding this municipal decision: <u>Jim Bartell</u> _____ _____ _____	
C. Name and Department of each City Official lobbied:	
Name: <u>Kris Michel</u>	Department: <u>Mayor's Office</u>
Name: <u>Bob Vacchi</u>	Department: <u>Development Services</u>
Name: <u>David Graham</u>	Department: <u>Councilmember Mark Kersey</u>
Name: _____	Department: _____
Name: _____	Department: _____
Name: _____	Department: _____
Name: _____	Department: _____
Name: _____	Department: _____
Name: _____	Department: _____
Name: _____	Department: _____
Name: _____	Department: _____

Comments: _____ TRIAL EX 000415

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

SCHEDULE A-1: CLIENT DISCLOSURE (Lobbying Contacts) Page 3 of 7

Name of Lobbying Firm: Bartell & Associates

Fill out a Schedule A-1 for each client for whom the firm had at least one lobbying contact during the reporting period.
Fill out a separate Schedule A-1 for each decision lobbied on by the firm for the client.

NAME OF CLIENT: <u>JL 6th Avenue Property LLC</u>		Telephone No.: _____	
_____		<u>San Diego</u>	<u>CA</u>
Client's Address (Number & Street)	(City)	(State)	(Zip)
		<u>92123</u>	
TOTAL COMPENSATION for all decisions lobbied on for the client, to the nearest \$1,000: \$ <u>500.00</u>			
<input type="checkbox"/> Check this box if the firm lobbied for this client on a contingency basis during the reporting period.			

MUNICIPAL DECISION (per Registration, plus specifics if necessary): <u>Approval of Medical Marijuana dispensary at 1033 6th Ave; Approval of medical marijuana dispensary at 1033 6th Ave.</u>	
A. Outcome Sought (per Registration, plus specifics if necessary): <u>Approval of dispensary ; Approval of dispensary</u>	
B. Name of each Lobbyist in the firm who lobbied City Officials regarding this municipal decision:	
<u>Jim Bartell</u>	
_____	_____
_____	_____
C. Name and Department of each City Official lobbied:	
Name: <u>David Graham</u>	Department: <u>Councilmember Mark Kersey</u>
Name: _____	Department: _____
Name: _____	Department: _____
Name: _____	Department: _____
Name: _____	Department: _____
Name: _____	Department: _____
Name: _____	Department: _____
Name: _____	Department: _____
Name: _____	Department: _____
Name: _____	Department: _____
Name: _____	Department: _____

Comments: _____ TRIAL EX. 000416

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

SCHEDULE A-1: CLIENT DISCLOSURE (Lobbying Contacts) Page 4 of 7

Name of Lobbying Firm: Bartell & Associates

Fill out a Schedule A-1 for each client for whom the firm had at least one lobbying contact during the reporting period.
Fill out a separate Schedule A-1 for each decision lobbied on by the firm for the client.

NAME OF CLIENT: <u>Lighthouse Strategies</u>		Telephone No.: _____	
_____		<u>Las Vegas</u>	<u>NV</u>
Client's Address (Number & Street)	(City)	(State)	(Zip)
		<u>89101</u>	
TOTAL COMPENSATION for all decisions lobbied on for the client, to the nearest \$1,000: \$ <u>2,500.00</u>			
<input type="checkbox"/> Check this box if the firm lobbied for this client on a contingency basis during the reporting period.			

MUNICIPAL DECISION (per Registration, plus specifics if necessary): <u>Approval of CUP for medical marijuana dispensary and cultivation facility ; Approval of CUP and update and transfer of Business Tax License to 10170 Sorrento Valley Road, Suite B, San Diego, CA 92121</u>	
A. Outcome Sought (per Registration, plus specifics if necessary): <u>Approval of CUP; Approval of CUP and update and transfer of Business Tax License to 10170 Sorrento Valley Road, Suite B, San Diego, CA 92121</u>	
B. Name of each Lobbyist in the firm who lobbied City Officials regarding this municipal decision:	
<u>Adrian Kwiatkowski</u>	_____
<u>Jim Bartell</u>	_____
C. Name and Department of each City Official lobbied:	
Name: <u>Bob Vacchi</u>	Department: <u>Development Services</u>
Name: <u>Shannon Thomas</u>	Department: <u>City Attorneys Office</u>
Name: <u>Ray Kahn</u>	Department: <u>Council District 1</u>
Name: <u>Victoria Joes</u>	Department: <u>Office of the Mayor</u>
Name: <u>Barbara Brye</u>	Department: <u>District 1</u>
Name: _____	Department: _____
Name: _____	Department: _____
Name: _____	Department: _____
Name: _____	Department: _____
Name: _____	Department: _____
Name: _____	Department: _____

Comments: _____ TRIAL EX. 000417

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

SCHEDULE A-1: CLIENT DISCLOSURE (Lobbying Contacts) Page 5 of 7

Name of Lobbying Firm: Bartell & Associates

Fill out a Schedule A-1 for each client for whom the firm had at least one lobbying contact during the reporting period.
Fill out a separate Schedule A-1 for each decision lobbied on by the firm for the client.

NAME OF CLIENT: Univentures Group Inc **Telephone No.:** _____
San Diego CA 92101
 Client's Address (Number & Street) (City) (State) (Zip)

TOTAL COMPENSATION for all decisions lobbied on for the client, to the nearest \$1,000: \$ 4,500.00

☐ Check this box if the firm lobbied for this client on a contingency basis during the reporting period.

MUNICIPAL DECISION (per Registration, plus specifics if necessary): Historic designation appeal for 1045 10th Ave; Historic designation appeal for 1045 10th Ave.

A. Outcome Sought (per Registration, plus specifics if necessary): successful appeal and historic designation removal; Successful appeal of Historic Designation

B. Name of each Lobbyist in the firm who lobbied City Officials regarding this municipal decision:

Jim Bartell

C. Name and Department of each City Official lobbied:

Name: <u>Liezl Gloria</u>	Department: <u>Council District 2</u>
Name: <u>Lara Gates</u>	Department: <u>Development Services Dept.</u>
Name: <u>Ryan Purdy</u>	Department: <u>Council District 2</u>
Name: <u>Myrtle Cole</u>	Department: <u>Council District 4</u>
Name: <u>Ian Clampett</u>	Department: <u>Council District 2</u>
Name: <u>Barbara Brye</u>	Department: <u>District 1</u>
Name: <u>David Alvarez</u>	Department: <u>Council District 8</u>
Name: <u>Scott Sherman</u>	Department: <u>Council District 7</u>
Name: <u>Chris Ward</u>	Department: <u>Council District 3</u>
Name: <u>Mark Kersey</u>	Department: <u>Council District 5</u>
Name: _____	Department: _____

Comments: _____ TRIAL EX. 000418

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

SCHEDULE A-2: CLIENT DISCLOSURE (No Lobbying Contacts)

Name of Lobbying Firm: Bartell & Associates

Complete a box for each registered client for whom the Lobbying Firm had no lobbying contacts during the reporting period.

NAME OF CLIENT: Acropolis Development Telephone No.: _____

Client's Address (Number & Street) _____ San Diego (City) CA (State) 92108 (Zip)

Contingency fees earned for lobbying performed in a previous reporting period (to the nearest \$1,000): \$ 0.00

NAME OF CLIENT: Bay Park Capital GP Telephone No.: _____

Client's Address (Number & Street) _____ San Diego (City) CA (State) 92111 (Zip)

Contingency fees earned for lobbying performed in a previous reporting period (to the nearest \$1,000): \$ 0.00

NAME OF CLIENT: ColRich Telephone No.: _____

Client's Address (Number & Street) _____ San Diego (City) CA (State) 92101 (Zip)

Contingency fees earned for lobbying performed in a previous reporting period (to the nearest \$1,000): \$ 0.00

NAME OF CLIENT: Far West Management LLC Telephone No.: _____

Client's Address (Number & Street) _____ La Jolla (City) CA (State) 92037 (Zip)

Contingency fees earned for lobbying performed in a previous reporting period (to the nearest \$1,000): \$ 0.00

NAME OF CLIENT: Jeromes Furniture Telephone No.: _____

Client's Address (Number & Street) _____ San Diego (City) CA (State) 92110 (Zip)

Contingency fees earned for lobbying performed in a previous reporting period (to the nearest \$1,000): \$ 0.00

NAME OF CLIENT: K. Henderson & Associates Inc Telephone No.: _____

Client's Address (Number & Street) _____ San Diego (City) CA (State) 92108 (Zip)

Contingency fees earned for lobbying performed in a previous reporting period (to the nearest \$1,000): \$ 0.00

Comments: _____ TRIAL EX. 000419

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

SCHEDULE A-2: CLIENT DISCLOSURE (No Lobbying Contacts)

Name of Lobbying Firm: Bartell & Associates

Complete a box for each registered client for whom the Lobbying Firm had no lobbying contacts during the reporting period.

NAME OF CLIENT: LST Investments LLC Telephone No.: _____

Client's Address (Number & Street) San Diego (City) CA (State) 92123 (Zip)

Contingency fees earned for lobbying performed in a previous reporting period (to the nearest \$1,000): \$ 0.00

NAME OF CLIENT: Point Loma GC 1, LLC Telephone No.: _____

Client's Address (Number & Street) San Diego (City) CA (State) 92122 (Zip)

Contingency fees earned for lobbying performed in a previous reporting period (to the nearest \$1,000): \$ 0.00

NAME OF CLIENT: Razuki Investments Telephone No.: _____

Client's Address (Number & Street) Lemon Grove (City) CA (State) 91945 (Zip)

Contingency fees earned for lobbying performed in a previous reporting period (to the nearest \$1,000): \$ 0.00

NAME OF CLIENT: San Diego Bike & Kayak Telephone No.: _____

Client's Address (Number & Street) La Jolla (City) CA (State) 92037 (Zip)

Contingency fees earned for lobbying performed in a previous reporting period (to the nearest \$1,000): \$ 0.00

NAME OF CLIENT: SNM Hillcrest Telephone No.: _____

Client's Address (Number & Street) San Diego (City) CA (State) 92106 (Zip)

Contingency fees earned for lobbying performed in a previous reporting period (to the nearest \$1,000): \$ 0.00

NAME OF CLIENT: Transportation Alliance Group Telephone No.: _____

Client's Address (Number & Street) San Diego (City) CA (State) 92108 (Zip)

Contingency fees earned for lobbying performed in a previous reporting period (to the nearest \$1,000): \$ 0.00

Comments: TRIAL EX. 000420
☐ If more space is needed, check box and attach continuation sheet(s).