

## GITY CLERK 2023 JUL 13 AM 10: 25

LOBBYIST QUAI	RTERLY REPORT	C	ity of Giendale, California		
	t (File by April 15) (File by January 15 of fo		3 <sup>rd</sup> (File by October 15)		
Year: 20					
SECTION 1: Lot	bbyist information:				
	with the City as:	Individual Lobbyist	Lobbyist Firm		
Name:Mich	nael Menjivar				
Firm: Stra	tegies360				
Business/mailir	ng Address:	290152, 18039	Chatsworth St., Granala	Hills, (A	9132
Phone:8182	126887			-	
E-mail: Michae	elm@strategies360.com			_	
SECTION 2: Cli	ent information for who	m you are lobbying (add	extra pages if necessary):		
Name: Swim	iply				
Address: 642	5 Weldlake Dr., Los Angele	s, CA 90068		-	
Phone:				_,	
E-mail:Camer	ron@swimply.com				
		ne marketplace for renting a s		_	
Description of	Project(s) or Legislation l	obbying for:			
Short-tern pool r	rentals				
0 <del>-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1</del>					



CTION 3: Financial In	formation:	lient: Swimply, \$18,000 total for 3 m
st the amount received	d or to be received from each c	ment:
Date received/to be received	Amount received /to be received	If non-monetary compensation, provide description and fair market value.
Monthly	6,000	
ist the amount received	d or to be received from each o	lient:
Date received/to be	d or to be received from each of Amount received /to be received	If non-monetary compensation, provide description and fair market value.
Date received/to be	Amount received /to be	If non-monetary compensation, provide
Date received/to be	Amount received /to be	If non-monetary compensation, provide
ist the amount received  Date received/to be received	Amount received /to be	If non-monetary compensation, provide

## <u>Total compensation received or promised from each client during this reporting period for lobbying purposes – please provide the name of each client and check the appropriate box for the range:</u>

Client Name	\$0-\$500	\$501- \$1,000	\$1,001- \$10,000	\$10,001- \$100,000	Over \$100,000
Swimply				\$18,000	



## SECTION 4: Information relating to City of Glendale Officials contacted or to be contacted during this reporting period:

Client: Swim	ply			
Name and T	itle of Official c	ontacted or to be	e contacted:	Council, Ardy Kassalkhian
	acted or will co ondence): <u>6/26/</u>			o in person meetings, remote meetings
Total numbe	er of contacts o	r anticipated con	tacts:	
		6-10 contacts		
Client:				
Ciletit.				
Name and T	itle of Official c	ontacted or to be	e contacted:	
				o in person meetings, remote meetings
and corresp	ondence):			
T. I. I			ta etc.	
		r anticipated con 6-10 contacts		
1 Contact	2-3 Contacts	0-10 contacts	11+ contacts	
Client:				
Name and T	itle of Official c	ontacted or to b	e contacted:	
Data(a) sont	eastad ar will so	entact lincludes	hut is not limited t	o in person meetings, remote meetings
			but is not innited t	
and corresp	onderice)			
Total number	er of contacts o	r anticipated cor	ntacts:	
		6-10 contacts		



## **SECTION 5: Lobbyist activity expenses:**

Please list payments made by you, during this reporting period, which directly benefitted any City Official or City Official's immediate family or domestic partner. Activity expenses do not include campaign contributions, however, they do include gifts, salaries and other forms of compensation to the City Official.

Client:		
/	_	
Name of City Official	Activity Expense paid/incurred by Lobbyist to City Official – please list dollar amount or fair market value.	Description of activity (e.g. gift, salary, loan forgiveness, passes, etc.)
Client:		
Name of City Official	Activity Expense paid/incurred by Lobbyist to City Official – please list dollar amount or fair market value.	Description of activity (e.g. gift, salary, loan forgiveness, passes, etc.)
Client:		
0		
Name of City Official	Activity Expense paid/incurred by Lobbyist to City Official – please list dollar amount or fair market value.	Description of activity (e.g. gift, salary, loan forgiveness, passes, etc.)



[_] Check here and attach additional sheets if reporting lobbying activities for more than one client. Pages from this form may be duplicated and attached as additional sheets.
I declare under penalty of perjury, under the laws of the State of California, that the information provided herein is true and correct.
Executed on 07/11/2013, at <u>los Anyles</u> , California.
Signature
Michael Menjivar
Printed Name
Title/Position