

LOBBYIS	T QUARTERLY REPORT	City	of Glendale, California	
Quarter:	1st (File by April 15) 4th (File by January 15 o		3 rd (File by October 15)	
Year: 20	24			
SECTION	1: Lobbyist information:			
l am reg	istered with the City as:	Individual Lobbyist	Lobbyist Firm	
Name:	Matthew Buck			
Firm:				_
Business	/mailing Address: 980 9th St	reet, Suite 1430, Sacramento, C	CA 95814	
Phone: _	(949) 734-2025			·
E-mail: _	disclosure@bmhlaw.com			
SECTION	2: Client information for w	hom you are lobbying (add ext	ra pages if necessary):	
Name: _	California Apartment Associat	tion		2024
Address:	980 9th Street, Suite 1430, \$	Sacramento, CA 95814		2024 APR 18
Phone: _	(800) 967-4222			PR 18 AMIL
E-mail: _	membership@caanet.org		,,,,,,	AM II: 02
Nature o	f Business:Trade Associati	on		02
Descripti	on of Project(s) or Legislatio	n lobbying for:		
Tenant p	rotection ordinance			
		, , , , , , , , , , , , , , , , , , ,		
			 	



SECTION 3: Financial Information:

List the amount received or to be received from each client: \$	\$5,500
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Date received/to be received	Amount received /to be received	If non-monetary compensation, provide description and fair market value.
03/29/2024	\$5,500	
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	lient: If non-monetary compensation, provide description and fair market value.
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
CA Apartment Assn		İ	x		
					"
		 			



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

Client: Calif	ornia Apartment A	Association				
Name and 7	Name and Title of Official contacted or to be contacted: Councilmember Ara Najarian					
			but is not limited t 30/24, 02/06/24, 02/	o in person meetings, remote meetings 27/24		
Total numb	er of contacts o	r anticipated con	ntacts:			
1 contact			11+ contacts			
	X					
Client: Califo	ornia Apartment A	Association				
Chefft.	oma ripariment.	isosolation				
Name and T	itle of Official c	ontacted or to be	e contacted: Cour	ncilmember Paula Devine		
D . ()						
		intact (includes, 1 1/24, 02/06/24, 02/2		o in person meetings, remote meetings		
and confesp	ondence). <u>onz</u>	172 1, OZ. 10012 1, OZ.	L1124			
Total number	er of contacts o	r anticipated con	itacts:			
1 contact	2-5 contacts	6-10 contacts	11+ contacts			
	Х					
Client: Calif	ornia Apartment A	Association				
Name and T	itle of Official c	ontacted or to be	e contacted: Coun	cilmember Ardy Kassakhian		
Date(s) cont and correspond	acted or will co ondence): 01/29	ntact (includes, l 9/24, 01/30/24, 02/0	out is not limited t 06/24, 02/07/24, 02/2	o in person meetings, remote meetings 27/24		
•						

Total number of contacts or anticipated contacts:

Х

1 contact 2-5 contacts 6-10 contacts 11+ contacts

Page	3	of	6



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

Client: Calif	ornia Apartment	Association			
Name and Title of Official contacted or to be contacted: Mayor Dan Brotman					
	tacted or will co ondence): <u>02/0</u>			o in person meetings, remote meetings	
Total numb	er of contacts o	or anticipated cor	ntacts:		
	7—————————————————————————————————————	6-10 contacts			
	X				
Client:					
Name and T	itle of Official o	ontacted or to b	e contacted:		
and corresp	ondence):	•		o in person meetings, remote meetings	
		6-10 contacts			
Client: Name and Title of Official contacted or to be contacted:					
	itie of Official c	ontacted or to bi	e contacted:		
		•	but is not limited t	o in person meetings, remote meetings	
Total numbe	er of contacts o	r anticipated con	itacts:		
Total number of contacts or anticipated contacts: 1 contact 2-5 contacts 6-10 contacts 11+ contacts					



Client: Calif	ornia Apartment A	Association		
Name and T Asatryan		ontacted or to b	e contacted:C	ouncilmember Ellen
		ontact (includes, 9/24, 02/06/24, 02/		to in person meetings, remote meetings
	,	r anticipated cor		_
1 contact	2-5 contacts	6-10 contacts	11+ contacts	
	L x	·		
[X_] Check I	•	additional sheet	•	e Official you will be contacting. ages from this form may be duplicated

[Remainder of page intentionally left blank]



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:		<u> </u>
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 Pages from this form may be duplicated and attached as additional sheets if reporting lobbying Pages from this form may be duplicated and attached as additional sheets if reporting lobbying Pages from this form may be duplicated and attached as additional sheets if reporting lobbying Pages from this form may be duplicated and attached as additional sheets if reporting lobbying 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 provided herein is true and correct.	California, that the information
Executed on 07 15 2024, at Long Beach	, California.
Russel	
Signature	
Matthew Buck	•
Printed Name	
Vice President of Public Affairs	
Title/Position	