

**REPORT OF LOBBYIST EMPLOYER**

(Government Code Section 86116)

1/6

or

**REPORT OF LOBBYING COALITION**

(2 Cal. Code of Regs. Section 18616.4)

**FORM 635**  
**1993**

**IMPORTANT:** Lobbying Coalitions must attach a completed Form 635-C to this Report.

REPORT COVERS PERIOD FROM 07/01/2020 THROUGH 09/30/2020

CUMULATIVE PERIOD BEGINNING 01/01/2020

FOR OFFICIAL USE ONLY

A

B

**TYPE OR PRINT IN INK**

For information required to be provided to you pursuant to the Information Practices Act of 1977, see [Information Manual on Lobbying Disclosure Provisions of the Political Reform Act](#).

NAME OF FILER:

BERKELEY CITY OF

BUSINESS ADDRESS: (Number and Street)

(City)

(State)

(Zip Code)

TELEPHONE NUMBER:

BERKELEY

CA

94704

**PART I - LEGISLATIVE OR STATE AGENCY ADMINISTRATIVE ACTIONS ACTIVELY LOBBIED DURING THE PERIOD**

(See instructions on reverse.)

If more space is needed, check box and attach continuation sheets.

**SUMMARY OF PAYMENTS THIS PERIOD**

A. Total Payments to In-House Employee Lobbyists (Part III, Section A, Column 1) .....	\$	<u>0.00</u>
B. Total Payments to Lobbying Firms (Part III, Section B, Column 4) .....	\$	<u>7500.00</u>
C. Total Activity Expenses (Part III, Section C) .....	\$	<u>0.00</u>
D. Total Other Payments to Influence (Part III, Section D) .....	\$	<u>7500.00</u>

GRAND TOTAL (A + B + C + D above) ..... \$ 15000.00

E. Total Payments in Connection with PUC Activities (Part III, Section E) ..... \$ 0.00

F. Campaign Contributions:  Part IV completed and attached  No campaign contributions made this period

**VERIFICATION**

I have used all reasonable diligence in preparing this Report. I have reviewed the Report and to the best of my knowledge the information contained herein and in the attached schedules is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on (Date)  
10/16/2020

At (City and State)  
Berkeley CA

By (Signature of Employer or Responsible Officer)  
Mrs. Dee Williams-Ridley

Name of Employer or Responsible Officer (Type or Print)  
Mrs. Dee Williams-Ridley

Title  
City Manager

PERIOD COVERED: 07/01/2020 09/30/2020

NAME OF FILER: BERKELEY CITY OF

**PART II - PARTNERS, OWNERS, AND EMPLOYEES WHOSE "LOBBYIST REPORTS" (FORM 615) ARE ATTACHED TO THIS REPORT** (See instructions on reverse.)

Name and Title	Name and Title

If more space is needed, check box and attach continuation sheets.

**PART III - PAYMENTS MADE IN CONNECTION WITH LOBBYING ACTIVITIES**

A. <b>PAYMENTS TO IN-HOUSE EMPLOYEE LOBBYISTS</b> (See instructions on reverse. Also enter the Amount This Period (Column 1) on Line A of the Summary of Payments section on page 1.)	(1) Amount This Period	(2) Cumulative Total To Date
	\$ 0.00	\$ 0.00

B. <b>PAYMENTS TO LOBBYING FIRMS</b> (Including Individual Contract Lobbyists)					
Name and Address of Lobbying Firm/Independent Contractor	(1) Fees & Retainers	(2) Reimbursements of Expenses	(3) Advances or Other Payments (attach explanation)	(4) Total This Period	(5) Cumulative Total to Date
Townsend Public Affairs Inc Newport Beach CA 92660	7500.00	0.00	0.00	7500.00	27500.00

If more space is needed, check box and attach continuation sheets

**TOTAL THIS PERIOD** (Column 4)  
Also enter the total of Column 4 on Line B of the Summary of Payments section on page 1.

\$ 7500.00

PERIOD COVERED: 07/01/2020 09/30/2020

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**C. ACTIVITY EXPENSES** (See instructions on reverse.)

Date	Name and Address of Payee	Name and Official Position of Reportable Persons and Amount Benefiting Each	Description of Consideration	Total Amount of Activity
				\$

If more space is needed, check box and attach continuation sheets.

TOTAL SECTION C (Activity Expenses)  
Also enter the total of Section C on Line C of the Summary of Payments section on page 1.

\$ 0.00

**D. OTHER PAYMENTS TO INFLUENCE LEGISLATIVE OR ADMINISTRATIVE ACTION**

NOTE: State and local government agencies do not complete this section. Check box and complete Attachment Form 640 instead.

1. PAYMENTS TO LOBBYING COALITIONS (NOTE: You must attach a completed Form 630 to this Report.)	\$ 0.00	
	\$ 53732.00	
2. OTHER PAYMENTS		
		TOTAL SECTION D (1 + 2) Also enter the total of Section D on Line D of the Summary of Payments section on page 1.
		\$ 7500.00

**E. PAYMENTS IN CONNECTION WITH ADMINISTRATIVE TESTIMONY IN RATEMAKING PROCEEDINGS BEFORE THE CALIFORNIA PUBLIC UTILITIES COMMISSION** Also, enter the total of Section E on Line E of the Summary of Payments section on page 1. (See instructions on reverse.)

\$ 0.00

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**PART IV -- CAMPAIGN CONTRIBUTIONS MADE** (Monetary and non-monetary campaign contributions of \$100 or more made to or on behalf of state candidates, elected state officers and any of their controlled committees, or committees supporting such candidates or officers must be reported in A or B below.)

A. If the contributions made by you during the period covered by this report, or by a committee you sponsor, are contained in a campaign disclosure statement which is on file with the Secretary of State, report the name of the committee and its identification number, if any, below.

Name of Major Donor or Recipient Committee Which Has Filed A Campaign Disclosure Statement: \_\_\_\_\_ Identification Number if Recipient Committee: \_\_\_\_\_

B. Contributions of \$100 or more which have not been reported on a campaign disclosure statement, including contributions made by an organization's sponsored committee, must be itemized below.

Date	Name of Recipient	I.D. Number if Committee	Amount
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$
			\$

If more space is needed, check box and attach continuation sheets.

**NOTE: Disclosure in this report does not relieve a filer of any obligation to file the campaign disclosure statements required by Gov. Code Section 84200, et seq.**

# Attachment Form 640

(Attachment to Form 635 or Form 645)

CALIFORNIA  
1993 FORM

# 640

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PERIOD COVERED: 07/01/2020--09/30/2020

NAME OF FILER: BERKELEY CITY OF

**For Use By:** A state or local government agency that qualifies as a lobbyist employer or a \$5,000 filer. Refer to the instructions on the cover page before completing this attachment.

**Other Payments to Influence Legislative or Administrative Action:**

1. Total payments for overhead expenses related to lobbying activity. <u>Report as a lump sum.</u> .....	\$ 0.00
2. Total payments to Lobbying Coalitions. <u>Report as a lump sum.</u> .....	\$ 46232.00
(Form 630 must be attached)	
3. Total payments of less than \$250 during the calendar quarter for lobbying activity (excluding overhead). <u>Report as a lump sum.</u> .....	\$ 0.00
4. Total payments of more than \$250 during the calendar quarter for lobbying activity (excluding overhead). Such payments must be itemized below. ....	\$ 7500.00
5. Grand total of "Other Payments to Influence Legislative or Administrative Action." Also enter this total on the appropriate line of the Summary of Payments section on Page 1 of Form 635 or Form 645. ....	<u>\$ 53732.00</u>

Itemize below payments of \$250 or more made during the quarter for lobbying activity. Provide the name and address of the payee, the amount paid during the quarter, and the cumulative amount paid to the payee since January 1 of the biennial legislative session covered by the report.

Also itemize dues or similar payments of \$250 or more made to an organization that makes expenditures equal to 10% of its total expenditures or \$15,000 or more in a calendar quarter to influence legislative or administrative action. Provide the organization's name and address, the amount paid to the organization during the quarter, and the cumulative amount paid to the organization since January 1 of the biennial legislative session covered by the report.

Name & Address of Payee	Amount This Quarter	Cumulative Amount Since January 1
League of CA Cities	\$ 28732.00	\$ 28732.00
Sacramento CA 95814		
	\$	\$
	\$	\$
Subtotal of all payments itemized above	<u>\$ 28732.00</u>	

If more space is needed, check box and attach continuation sheets.

# TEXT ANNOTATION

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Schedule F635

Reference No:

Administrative Actions: -California Department of Public Health: Cannabis manufacturing regulations -California Department of Food/Ag: Cannabis cultivation regulations -Bureau of Cannabis Control: special event regulations retail regulations -Go Biz: Cannabis Policy COVID-19 actions/funding. -Legislature: Budget and Municipal Funding COVID 19 -Governors Office: Administration and Legislature COVID 19 Department of Housing and Community Development: Affordable Housing Funding Department of Transportation: Road Repair Funding Department of Parks and Recreation: Parks Funding AB 291 AB 725 AB 953 AB 1850 AB 1851 AB 1905 AB 1907 AB 1908 AB 1924 AB 1934 AB 1962 AB 2044 AB 2054 AB 2078 AB 2085 AB 2093 AB 2137 AB 2138 AB 2145 AB 2148 AB 2151 AB 2168 AB 2178 AB 2182 AB 2206 AB 2213 AB 2231 AB 2262 AB 2270 AB 2307 AB 2323 AB 2329 AB 2344 AB 2345 AB 2353 AB 2359 AB 2364 AB 2367 AB 2379 AB 2405 AB 2421 AB 2434 AB 2438 AB 2470 AB 2493 AB 2506 AB 2534 AB 2565 AB 2580 AB 2589 AB 2612 AB 2616 AB 2639 AB 2662 AB 2706 AB 2707 AB 2712 AB 2722 AB 2763 AB 2829 AB 2843 AB 2852 AB 2870 AB 2872 AB 2881 AB 2889 AB 2916 AB 2917 AB 2943 AB 2950 AB 2960 AB 2962 AB 2988 AB 3009 AB 3051 AB 3107 AB 3122 AB 3131 AB 3144 AB 3145 AB 3146 AB 3147 AB 3148 AB 3149 AB 3153 AB 3154 AB 3155 AB 3157 AB 3196 AB 3205 AB 3207 AB 3234 AB 3256 AB 3300 SB 45 SB 50 SB 773 SB 795 SB 899 SB 902 SB 931 SB 939 SB 950 SB 952 SB 963 SB 979 SB 1015 SB 1030 SB 1035 SB 1049 SB 1052 SB 1061 SB 1069 SB 1072 SB 1079 SB 1085 SB 1088 SB 1092 SB 1096 SB 1099 SB 1112 SB 1120 SB 1138 SB 1144 SB 1160 SB 1185 SB 1203 SB 1215 SB 1227 SB 1289 SB 1314 SB 1318 SB 1354 SB 1387 SB 1400 SB 1410 SB 1441