From 4/1/11

VIDICAL OCLIDE DEDORT

	For Official Use Only TO BE IVE B TO SERVING SOFFICE
-	JUL 27 PM 2: 16
0	AN DIEGO, CALIF.
	\$ C

баснич в че и ключения выполнений и в сопсавального и учет негреду потобративателя месте бог и дамена и дай	ORDERSKE LANGSESSMERE STOPPEN NAMER STOPPEN STOPPEN STOPPEN STOPPEN STOPPEN STOPPEN STOPPEN STOPPEN STOPPEN ST		orm EC-603]		
Total # of Pages: 10				SAN DIEG	P, CALIF.
Chec	k Box if a	n Amendment (explain:		-	
Checl	k Box if T	erminating Status as a Lobby	ing Firm (see instructions)	Suppression and additional theory of the control of	COSTERNA CONTRACTOR AND CONTRACTOR AND CONTRACTOR AND CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CONTRACTOR CO
Identify t	he Firm:				
The CI	ay Com	pany			ngarakasana da mildi kudikingkingapa (ap-opo) wara wana ninkush dikiki (1918-1914
Name of	Lobbying	Firm	Tele	ephone Number	
			San Diego	WASHINGTON WASHINGTON	92110
Busines	s Address	(Number & Street)	(City)	(State)	(Zip)
Disclosu	re Sched	lules:			
Schedu	le A: Clic	ent Disclosure. You <u>must</u> co	omplete Schedule A-1 <u>or</u> A-2	2 for each regi	stered client.
		for the reporting period.	schedule) if the firm has activi		
₩ ₩	4	schedule for the reporti			
YES	NO	You MUST check one box	for each of the following s	chedules.	
	V	Schedule B: Activity Expe	enses. Activity expenses ma	de during the re	eporting period.
V	Sobodula C: Candidate Contributions Contributions of \$100 or more made to a City			e made to a City eporting period.	
	Schedule D: Ballot Measure Contributions. Contributions of \$100 or more made by owners, officers, and lobbyists of the firm during the reporting period to a City candidate-controlled ballot measure committee.				
EAST-ONLY OF THE PARTY OF THE P	Schedule E: Fundraising Activities. Fundraising activities by owners, officers, and lobbyists of the firm in the amount of \$2,000 or more during the reporting period.			, officers, and g period.	
	Schedule F: Campaign Services. Paid campaign-related services personally provided by owners, officers, and lobbyists of the firm during the reporting period.			rsonally ng period.	
DACHEN ALES	7	Schedule G: City Contract officers, and lobbyists of the	ct Services. Paid services pe e firm under a City contract d	ersonally provid uring the report	ed by owners, ing 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.

Execu	ed on 7/27/11	_at	San Diego, CA		
	\ \/\/	(Date)	(City and State)		
By:	X HIM	NM V	Stephanie Saathoff	President	
7	(Sigr	fature)	(Print Name)	(Title)	
	· · · /				

Name of Lobbying Firm:	The C	lay	Company
------------------------	-------	-----	---------

Fill out at a Schedule A-1 for each client for whom the firm had <u>at least one lobbying contact</u> 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: Allied Waste	Telephone Nc	Commence of the commence of th
	San Diego	CA 92111
Client's Address (Number & Street)	(City)	(State) (Zip)
TOTAL COMPENSATION (see instructions) for the real Check this box if the firm lobbied for this client on		
MUNICIPAL DECISION (BE SPECIFIC): Sycamore	e Landfill Master Plan (appro	ved 2008)
MONICIPAL DECISION (BE 37 LOTTO).		
A. Outcome Sought: Implementation of Master	Plan	
B. Name of each Lobbyist in the firm who lobbied C Stephanie Saathoff	ity Officials regarding this municipa Maddy Kilkenny	al decision:
Nicole Clay		
THE STATE OF THE S	A MARIAN AND AND AND AND AND AND AND AND AND A	
C. Name and Department of each City Official lobbic	ad.	
C. Name and Department of each City Official lobbio Name: Katie Hansen	Department: Council Dist	rict 2
Name: Almis Udrys	Department: Mayor's offic	
Name: Aimee Faucett	Department: Mayor's offic	Ce
Name: Mary Ann Wallace	Department: Council Dist	
Name: Don Mullen	Department: Council Dist	
Name: Thyme Curtis	Department: Council Dist	rict 2
Name:	Department:	
Name:	Department:	
Name:	Department:	
Name:	Department:	ng Agil a marabrasa (con representation and an analysis) delivers described in the second and an analysis of the 1807/18
Name:	Department:	groupes and distribution and resistance of the contract of the
Name:	Department:	
The second of th		
Comments:	Maka ara garay ka shiridh shiya 1970 ya 1970 y	1
If more space is needed, check box and attach cor	ntinuation sheet(s). Identify the clie	ent's name on each

continuation sheet (but do not repeat client's address or compensation information).

Form EC-603 (Rev. 12/04/09)

SCHEDULE A-1: CLIENT DISCLOSURE (Lobbying Contacts) Name of Lobbying Firm: The Clay Company Fill out at 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: C & S Companies Telephone No. 92108 San Diego CA (State) (Zip)(City) Client's Address (Number & Street) TOTAL COMPENSATION (see instructions) for the reporting period, to the nearest \$1,000: \$_15,000 Check this box if the firm lobbied for this client on a contingency basis during the reporting period. MUNICIPAL DECISION (BE SPECIFIC): Client introductions A. Outcome Sought: B. Name of each Lobbyist in the firm who lobbied City Officials regarding this municipal decision: Maddy Kilkenny Stephanie Saathoff Nicole Clay C. Name and Department of each City Official lobbied: Department: Mayor's office Name: David Graham Department: Name: Department: Name: Department: Name: Department: Name: _____ Department: Name: Department: Department: Name: Department: Name: Department: Department: Name: Name: Department: Comments:

If more space is needed, check box and attach continuation sheet(s). Identify the client's name on each

continuation sheet (but do not repeat client's address or compensation information).

Form EC-603 (Rev. 12/04/09)

A	ME OF CLIENT Microsoft Corporation	Telephon	ie No.
		Sacramento	CA 95814
lie	nt's Adaress (Number & Street)	(City)	(State) (Zip)
Ο.	TAL COMPENSATION (see instructions) for the rep	orting period to the neares	t \$1 000 · \$ 15,000
	Check this box if the firm lobbied for this client on a		
onen euri			
	NICIPAL DECISION (BE SPECIFIC): Client intro	ductions	rendered by the second process of the second
144			
١.	Outcome Sought:		
١.	outcome dought.		
 3.	Name of each Lobbyist in the firm who lobbied City	Officials regarding this mu	nicipal decision:
	Stephanie Saathoff	Maddy Kilkenny	
	Nicole Clay		
) .	Name and Department of each City Official lobbied	population and additional property of the	
<i>.</i>	Name: Almis Udrys	Department: Mayor's	office
	Name: Jaymie Bradford	Department: Mayor's	
	Name: Jimmy Slack	Department: Council	District 4
	Name:	Department:	vuul Ekkikooloolis ja ja poostuusi ehenn joh kiikooliikooliikooliikooliista ja on kun kun kun kun kakkoolii oh on kondennan
	Name:	Department:	
	Name:		
	Name:		
	Name:	Department:	
	Name:		

SCHEDULE A-1: CLIENT DISCLOSURE (Lobbying Contacts) Name of Lobbying Firm: The Clay Company Fill out at 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: Otay-Tijuana Venture, LLC Telephone No.: 60606 Chicago (Zip)Client's Address (Number & Street) TOTAL COMPENSATION (see instructions) for the reporting period, to the nearest \$1,000: \$23,000 Check this box if the firm lobbied for this client on a contingency basis during the reporting period. MUNICIPAL DECISION (BE SPECIFIC): San Diego - Tijuana Airport Cross Border Facility A. Outcome Sought: Approval of land use entitlement application B. Name of each Lobbyist in the firm who lobbied City Officials regarding this municipal decision: Maddy Kilkenny Stephanie Saathoff Nicole Clay C. Name and Department of each City Official lobbied: Department: Mayor's office Name: Julie Dubick Name: Mayor Sanders Department: Mayor Department: Development Services Name: Kelly Broughton Department: Mayor's office Name: Denice Garcia Department: Council District 8 Name: Rudy Lopez Department: Council District 8 Name: David Alvarez Department: Development Services Name: Cecelia Gallardo Department: Mayor's office Name: Jay Goldstone Department: Name: Department: Name: Name: _____ Department: ____ Name: Department:

If more space is needed, check box and attach continuation sheet(s). Identify the client's name on each continuation sheet (but do not repeat client's address or compensation information).

Comments:

1 10 4 1	ME OF CLIENT: Garden Communities	Telephone	No.
	- VINV MILLY	San Diego	CA 92121
Cli	ent's Address (Number & Street)	(City)	(State) (Zip)
~~	TAL COMPENSATION (see instructions) for the re	porting period to the nearest	\$1,000 \$ 5,000
	Check this box if the firm lobbied for this client on		
Secretaria de la constanta de		Monoment of the Control of the Contr	reserve consideration had being the second of the construction of
MI	INICIPAL DECISION (BE SPECIFIC): La Jolla C	crossroads	COS del CAS del CAS (CAS CAS CAS CAS CAS CAS CAS CAS CAS CAS
	085 Judicial Drive, San Diego, CA 92121		
`- -	Outcome Sought: Change entitled use / Cor	TREAT LOCATION AND REPORT OF THE PROPERTY OF T	t initiation
٦.	Outcome Cought.		
— В.	Name of each Lobbyist in the firm who lobbied Ci	ty Officials regarding this muni	cipal decision:
	Stephanie Saathoff	Maddy Kilkenny	
	Nicole Clay		agen gameleri kali da 1880 B. Barran e e e e e e e e e e e e e e e e e e e
C.	Name and Department of each City Official lobbie	ed:	
	Name: Sherri Lightner	Department: Council [District 1
	Name: Kelly Broughton	Department: Developr	ment Services
	Name: David Graham	Department: Mayor's o	
	Name: Jessie Mays	Department: Council [
	Name: Nika Bukalova	Department: Council I	District 1
	Name:	Department:	
	Name:	Department:	and and account of the control of th
		Department:	
	Name:		
	Name:		and the proof of the Control of the
		Department:	
	Name:	Department: Department:	

Name of Lobbying Firm: The Clay Company Fill out at 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: car2go/Daimler Telephone No. Austin 78703 (City) (Zip)Client s Address (Number & Street) **TOTAL COMPENSATION** (see instructions) for the reporting period, to the nearest \$1,000: \$ 0 Check this box if the firm lobbied for this client on a contingency basis during the reporting period. MUNICIPAL DECISION (BE SPECIFIC): Municipal Code change related to car sharing services A. Outcome Sought: Approval of Municipal Code change B. Name of each Lobbyist in the firm who lobbied City Officials regarding this municipal decision: Maddy Kilkenny Stephanie Saathoff Nicole Clay C. Name and Department of each City Official lobbied: Department: Mayor's office Name: Julie Dubick Department: Mayor's office Name: David Graham Department: Council District 7 Name: Don Mullen Department: Council District 7 Name: Drew Ector Department: Council District 3 Name: Todd Gloria Department: Council District 3 Name: Katie Keach Department: Council District 6 Name: Job Nelson Department: Council District 6 Name: Matt Donnellan Department: Council District 8 Name: Travis Knowles Department: Council District 7 Name: Marti Emerald Department: Mayor's office Name: Rachel Laing Department: Name: Comments: If more space is needed, check box and attach continuation sheet(s). Identify the client's name on each continuation sheet (but do not repeat client's address or compensation information).

SCHEDULE A-1: CLIENT DISCLOSURE (Lobbying Contacts) Name of Lobbying Firm: The Clay Company Fill out at 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: TEGSCO (Auto Return) Telephone No.: San Francisco (State) Clience Addiese (City) (Zip) ...umber & Street) TOTAL COMPENSATION (see instructions) for the reporting period, to the nearest \$1,000: \$5,000 __ Check this box if the firm lobbied for this client on a contingency basis during the reporting period. MUNICIPAL DECISION (BE SPECIFIC): RFP No. 9926-098P (towing dispatch) A. Outcome Sought: Implementation of award B. Name of each Lobbyist in the firm who lobbied City Officials regarding this municipal decision: Maddy Kilkenny Stephanie Saathoff Nicole Clay

C. Name and Department of each City Official lobbied: Name: Don Mullen Department: Council District 7 Department: Mayor's office Name: Jay Goldstone Department: Name: Name: Department: Name: Department: Department: Name: Department: Department: Name: Name: Department: Department: Name: Name: Department: Name: Department:

If more space is needed, check box and attach continuation sheet(s). Identify the client's name on each continuation sheet (but do not repeat client's address or compensation information).

Comments:

Name of Lobbying Firm: The Clay Company Complete a box for each registered client for whom the Lobbying Firm had no lobbying contacts during the reporting period. NAME OF CLIENT: Scripps Health Telephone No.: San Diego (Number & Street) Client's Address Contingency fees earned for lobbying performed in a previous reporting period (to the nearest \$1,000): $\0 NAME OF CLIENT: 2-1-1 San Diego _____ Telephone No. San Diego 92168 (Zip) (City) (Number & Street) Client's Address Contingency fees earned for lobbying performed in a previous reporting period (to the nearest \$1,000): \$NAME OF CLIENT: Telephone No.: _____ (City) (State) (Zip) (Number & Street) Client's Address Contingency fees earned for lobbying performed in a previous reporting period (to the nearest \$1,000): \$_____ NAME OF CLIENT: ______ Telephone No.: _____ (State) (Zip) (City) Client's Address (Number & Street) Contingency fees earned for lobbying performed in a previous reporting period (to the nearest \$1,000): \$______ NAME OF CLIENT: ______ Telephone No.: _____ (State) (Zip) (City) Client's Address (Number & Street) Contingency fees earned for lobbying performed in a previous reporting period (to the nearest \$1,000): \$_____ NAME OF CLIENT: _____ Telephone No.: _____ (Zip)(State) (Citv) Client's Address (Number & Street) Contingency fees earned for lobbying performed in a previous reporting period (to the nearest \$1,000): \$_____ Comments: If more space is needed, check box and attach continuation sheet(s).

Form EC-603 (Rev. 12/04/09)

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

SCHEDULE C: CAMPAIGN DISCLOSURE - CITY CANDIDATES

Name of Lobbying Firm: The Clay Company				
Fill out a separate entry for EACH contribution made contributed \$100 or more during the reporting period report contributions made to a candidate-controlled b	by an owner, compensated officer, or lobbyist of the firm who to a City candidate committee. (Do not use this schedule to allot measure committee; use Schedule D instead.)			
Name of individual making the contribution: Stephanie Saathoff				
Name of candidate supported: Todd Gloria				
	Amount of contribution: \$200			
Name of individual making the contribution: Steph	nanie Saathoff			
Name of candidate supported: Marti Emerald				
	Amount of contribution: \$500			
Name of individual making the contribution: Mado	dy Kilkenny			
Name of candidate supported: Todd Gloria				
	Amount of contribution: \$200			
Name of individual making the contribution:				
Name of candidate supported:				
Date contribution made:	Amount of contribution: \$			
Name of individual making the contribution:				
Name of candidate supported:				
Date contribution made:	Amount of contribution: \$			
Name of candidate supported:				
Date contribution made:	Amount of contribution: \$			
Comments:				
If more space is needed, check box and attach o	continuation sheet(s).			