Calendar Year 2 0 <u>1</u> 1

CITY OF SAN DIEGO

LOBBYING FIRM REGISTRATION FORM

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		[Form EC-601]	140	
Type or Print in I	nk. File Original with the	e City Clerk.	113	
✓ Check Box i	f an Amendment (explai	in: Addition of client	Lobbyists Added:	
	Total Control of Contr		_) Clients Added: 3 & 4 (C	2.0
Total Number of	Pages: 4 (includir	ag cover sheet)		700
Identify the Firn		ig devel energy	Fees Due: \$ 30.06	
identity the i iii	<u> </u>		CK# 037	-5
Hecht Solbe	erg Robinson Gold	berg & Bagley		
Name of Lobbyir	ng Firm		Telephone Number	
		San Diego	CA 92101	
Business Addres	s (Number & Street)	(City	(State) (Zip)	
Schedule A: Lo	Officials within the past	mplete this schedule by identifyi 30 days, or is expected to lobby	ng each individual in the firm who)
		lete this schedule by identifying	each client for whom the firm	
provides lobbying	services.			
Schedule C: A	ctivities Disclosure. C	complete this schedule if any "Ye	es" boxes are checked.	
	Check box if the fir	m has information to report regardi	ng the applicable activity.	
	Check box if the fir	m has <u>no</u> information to report rega	rding the applicable activity.	
YES NO	You <u>MUST</u> check	one box for each part of Schedu	e C.	
	Part 1: Fundraising A engaged in "fundraising	Activities. Owners, compensated of activities for a current elected Cit	fficers, and lobbyists of the firm who y Official within the last two years.	
	Part 2: Campaign Ser provided compensated	rvices. Owners, compensated offic campaign services to an elected C	ers, and lobbyists of the firm who ity Official within the last two years.	
	Part 3: Contract Serv	ices. Owners, compensated office	rs, and lobbyists of the firm who	
	provided compensated	services under a City contract with	n the last two years.	
Schedule D: Del	eting Clients & Lobbyi	sts (Amendment Only). Comp	lete this schedule if removing	
		must check the amendment box		
		VERIFICATION		
I have been authorize	red by the Lobbying Firm i	dentified above to make this verific	ation. I have reviewed and understan	ıd
reasonable diligence	e in the course of reviewin	San Diego Municipal Code §§ 27.4 g this Registration Form for comple	teness and accuracy. I declare under	r
penalty of perjury ur	nder the laws of the State (of California that the contents of this	Registration Form, including all	
belief, and as to tho	se matters I believe them	nplete, except as to those matters v to be true.	riich are stated on information and	
Executed on //	18/11 .	at San Diego, CA		
: 7	(Date)	(City an	d State)	
Van VK	KS	Paul Robinson	Partner	
By: My f	ignature)	(Print Name)	Partner (Title)	
		the firm (optional): dnickens@		
	a point of contact within	the fifth (optional).		

Note: Registration Terminates Every January 5. Annual Re-Registration is Required.

SCHEDULE B: CLIENT DISCLOSURE

Name of Lobbying Firm: Hecht Solberg Robinson Goldberg & Bagley LLP

CLIENT'S NAME: The Grand Del Mar Resort L.P. San Diego Client's Address (Number & Street) Client's Address: Resort developer, Grand Del Mar Resort located at 5300 Grand Del Mar Way, San Diego Specific or General Municipal Decisions (see instructions): In titlements to correct and bring legal Outcome(s) sought: Entitlements Entitlements If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition or Municipal Decisions (see instructions): CLIENT'S NAME: Telephone No: Telephone No: Telephone No: CLIENT'S NAME: Telephone No: CLI				
Client's Address (Number & Street) Resort developer, Grand Del Mar Resort located at 5300 Grand Del Mar Way, San Diego Specific or General Municipal Decisions (see instructions): If this client is a coalition or membership organization, state the name, address, and telephone number of each ember of the coalition or membership organization, state the name, address, and telephone number of each ember of the coalition or membership organization, state the name, address, and telephone number of each member of General Municipal Decisions (see instructions): Column	CLIENT'S NAME: The Grand Del Mar Resort L.P	. Tele	phone No.:	
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nments:	ember of the coalition who has reached the \$1,000 thres	hold (see instructions):	rtelephone number of ea	icn
			3,7	
	ments:			
f more space is needed, check box and attach continuation shee t(s).	f more space is needed, check box and attach cont	inuation shee t(s).		

SCHEDULE B: CLIENT DISCLOSURE

Name of Lobbying Firm: Hecht Solberg Robinson Goldberg & Bagley LLP

		San Diec		one No	
Client's Address (Number	er & Street)	<u> </u>	(City)	(State)	92 106 (Zip)
Nature and Purpose of Client's	Business: Charte	r School, 2120	San Diego A	Avenue, San	
Specific or General Municipal Desychiatric clinic near the	Decisions (see instruc school	ctions): Oppositi	on to locatio	n of VA home	eless
Outcome(s) sought: Denial of	f clinic at location	across from the	e school		
If this client is a coalition or men member of the coalition who has	mbership organizatio s reached the \$1,000	n, state the name, threshold (see in	address, and t structions):	elephone numb	per of each
CLIENT'S NAME:			Telephor	ne No.:	
Client's Address (Number	& Street)		(City)	(State)	(Zip)
Nature and Purpose of Client's E	Business:				
Nature and Purpose of Client's E		***			
Specific or General Municipal De		ions):			
Specific or General Municipal De	ecisions (see instruct	ions):	address, and tel		
Specific or General Municipal De Outcome(s) sought: this client is a coalition or memi	ecisions (see instruct	ions):	address, and tel		

SCHEDULE B: CLIENT DISCLOSURE

Name of Lobbying Firm: Hecht Solberg Robinson Goldberg & Bagley LLP

CLIENT'S NAME: Gloria McColl Powell	Telep	Telephone No.:	
	Roseburg	OR 97470	
Client's Address (Number & Street)	(City)	(State) (Zip)	
Nature and Purpose of Client's Business: Property	y owner		
Specific or General Municipal Decisions (see instructive regarding requested right of way	ions): Property located at	5072 Federal, San Dieg	
Outcome(s) sought: Right of way			
If this client is a coalition or membership organization, member of the coalition who has reached the \$1,000 to	, state the name, address, and threshold (see instructions):	telephone number of each	
CLIENT'S NAME:	Teleph	one No.:	
Client's Address (Number & Street)	(City)	(State) (Zip)	
Nature and Purpose of Client's Business:			
Specific or General Municipal Decisions (see instructio	ons):		
Outcome(s) sought:			
this client is a coalition or membership organization, s nember of the coalition who has reached the \$1,000 th	state the name, address, and t nreshold (see instructions):	elephone number of each	
mments:			
If more space is needed, check box and attach c	ontinuation shee t(s).		