

Calendar Year  
**2013**

# CITY OF SAN DIEGO

## LOBBYING FIRM REGISTRATION FORM [Form EC-601]

For Official Use Only

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06/26/2013  
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Lobbyists Added: \_\_\_\_\_  
Clients Added: \_\_\_\_\_  
Fees Due: \$ \_\_\_\_\_

Check Box if an Amendment (explain: ADDING CLIENT.)

Total Number of Pages: 14 (including cover sheet)

### Identify the Firm.

CORTES COMMUNICATIONS, LLC			
Name of Lobbying Firm		Telephone Number	
San Diego		CA	92101
Business Address (Number & Street)	(City)	(State)	(Zip)

**Schedule A: Lobbyist Disclosure.** Complete this schedule by identifying each individual in the firm who has lobbied the City during the 30 days prior to registration, or is expected to lobby the City during the year.

**Schedule B: Client Disclosure.** Complete this schedule by identifying each client for whom the firm provides lobbying services.

**Schedule C: Activities Disclosure.** Complete this schedule if any "Yes" boxes are checked.

Check box if the firm has information to report regarding the applicable activity.  
Check box if the firm has no information to report regarding the applicable activity.

YES	NO	
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<b>Part 1: Fundraising Activities.</b> Owners, compensated officers, and lobbyists who engaged in "fundraising activities" for the benefit of a current elected City Official within the last two years.
<input type="checkbox"/>	<input checked="" type="checkbox"/>	<b>Part 2: Campaign Services.</b> Owners, compensated officers, and lobbyists who provided compensated campaign services to an elected City Official within the last two years.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<b>Part 3: Contract Services.</b> Owners, compensated officers, and lobbyists who provided compensated services under a City contract within the last two years.

**Schedule D: Deleting Clients & Lobbyists (Amendment Only).** Complete this schedule if removing clients or lobbyists from your registration (must check the amendment box above).

### VERIFICATION

I have been authorized by the Lobbying Firm identified above to make this verification. I have reviewed and understand the requirements of the Lobbying Ordinance (San Diego Municipal Code §§ 27.4001-27.4055). I have exercised reasonable diligence in the course of reviewing this Registration Form for completeness and accuracy. I declare under penalty of perjury under the laws of the State of California that the contents of this Registration Form, 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.

Executed on 06/19/2013 at SAN DIEGO, CALIFORNIA  
(Date) (City and State)

By: \_\_\_\_\_ MARCO POLO CORTES \_\_\_\_\_ PRESIDENT  
(Signature) (Print Name) (Title)

Email address for a point of contact within the firm (optional): \_\_\_\_\_

**Registration terminates every January 5; annual re-registration is required.**

# SCHEDULE A: LOBBYIST DISCLOSURE

Name of Lobbying Firm: CORTES COMMUNICATIONS, LLC

**Identify the Firm's Lobbyists.** List the name of each individual in the firm who has lobbied City Officials during the 30 days prior to registration, or is expected to lobby City Officials during the year.

Name of Individual

Name of individual

MARCO POLO CORTES

Comments: \_\_\_\_\_

If more space is needed, check box and attach continuation sheet(s).

# SCHEDULE B: CLIENT DISCLOSURE

Name of Lobbying Firm: CORTES COMMUNICATIONS, LLC

<b>CLIENT'S NAME:</b> <u>AMERICAN TOWING INC.</u>		<b>Telephone No.:</b> _____	
Client's Address	(Number & Street)	<u>Chula Vista</u>	<u>CA</u> <u>91911</u>
		(City)	(State) (Zip)
Nature and Purpose of Client's Business: <u>TOWING AND AUTO DISMANTLING.</u>			
Specific or General Municipal Decisions (see instructions): <u>ANY MATTER RELATED TO THE CITY OF SAN DIEGO MUNICIPAL TOWING CONTRACT.</u>			
Outcome(s) sought: <u>FAIR AND REASONABLE IMPLEMENTATION OF MUNICIPAL TOWING CONTRACT.</u>			
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions): _____ _____ _____			

<b>CLIENT'S NAME:</b> _____		<b>Telephone No.:</b> _____	
Client's Address	(Number & Street)	(City)	(State) (Zip)
Nature and Purpose of Client's Business: _____			
Specific or General Municipal Decisions (see instructions): _____			
Outcome(s) sought: _____			
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions): _____ _____ _____			

Comments: \_\_\_\_\_

If more space is needed, check box and attach continuation sheet(s).

# SCHEDULE B: CLIENT DISCLOSURE

Name of Lobbying Firm: CORTES COMMUNICATIONS, LLC

<b>CLIENT'S NAME:</b> <u>BORDER TRANSPORTATION COUNCIL</u>		<b>Telephone No.:</b> _____	
Client's Address	(Number & Street)	<u>San Diego</u>	<u>CA</u> <u>92173</u>
		(City)	(State) (Zip)
Nature and Purpose of Client's Business: <u>TRANSPORTATION ADVOCACY GROUP.</u>			
Specific or General Municipal Decisions (see instructions): <u>REQUESTING LAW ENFORCEMENT CONTROL OF ILLEGAL TRANSPORTATION OPERATORS AT THE SAN YSIDRO INTER-MODAL TRANSPORTATION FACILITY.</u>			
Outcome(s) sought: <u>ENFORCEMENT OF LOCAL, STATE AND FEDERAL TRANSPORTATION LAWS.</u>			
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions): _____ _____ _____			

<b>CLIENT'S NAME:</b> _____		<b>Telephone No.:</b> _____	
Client's Address	(Number & Street)	(City)	(State) (Zip)
Nature and Purpose of Client's Business: _____			
Specific or General Municipal Decisions (see instructions): _____			
Outcome(s) sought: _____			
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions): _____ _____ _____			

Comments: \_\_\_\_\_

If more space is needed, check box and attach continuation sheet(s).

# SCHEDULE B: CLIENT DISCLOSURE

Name of Lobbying Firm: CORTES COMMUNICATIONS, LLC

<b>CLIENT'S NAME:</b> <u>BEER COMPANY</u>		Telephone No.:	
Client's Address	(Number & Street)	<u>San Diego</u>	<u>CA</u> <u>92101</u>
		(City)	(State) (Zip)
Nature and Purpose of Client's Business: <u>RESTAURANT / BREWERY.</u>			
Specific or General Municipal Decisions (see instructions): <u>REQUESTING SUPPORT FOR LIVE ENTERTAINMENT PERMIT AT 602 BROADWAY, STE. 110, SAN DIEGO, CA 92101.</u>			
Outcome(s) sought: <u>APPROVAL OF LIVE ENTERTAINMENT PERMIT AT 602 BROADWAY, STE. 110, SAN DIEGO, CA 92101</u>			
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):			

<b>CLIENT'S NAME:</b> _____		Telephone No.:	
Client's Address	(Number & Street)	(City)	(State) (Zip)
Nature and Purpose of Client's Business: _____			
Specific or General Municipal Decisions (see instructions): _____			
Outcome(s) sought: _____			
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):			

Comments: \_\_\_\_\_

If more space is needed, check box and attach continuation sheet(s).

# SCHEDULE B: CLIENT DISCLOSURE

Name of Lobbying Firm: CORTES COMMUNICATIONS, LLC

<b>CLIENT'S NAME:</b> <u>BUCCI GELATERIE, LLC</u>		Telephone No.:	
Client's Address	(Number & Street)	<u>San Diego</u>	<u>CA</u> <u>92101</u>
		(City)	(State) (Zip)
Nature and Purpose of Client's Business: <u>RESTAURANT / CAFE AND GELATERIE.</u>			
Specific or General Municipal Decisions (see instructions): <u>INQUIRE ABOUT VENDOR OPPORTUNITIES WITH THE CITY OF SAN DIEGO MAIN LIBRARY LOCATED AT 330 PARK BLVD., SAN DIEGO, CA 92101</u>			
Outcome(s) sought: <u>SUCCESSFULLY ATTAIN VENDING POSITION WITH CITY OF SAN DIEGO MAIN LIBRARY LOCATED AT 330 PARK BLVD., SAN DIEGO, CA 92101</u>			
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):			

<b>CLIENT'S NAME:</b> _____		Telephone No.:	
Client's Address	(Number & Street)	(City)	(State) (Zip)
Nature and Purpose of Client's Business: _____			
Specific or General Municipal Decisions (see instructions): _____			
Outcome(s) sought: _____			
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):			

Comments: \_\_\_\_\_

If more space is needed, check box and attach continuation sheet(s).

# SCHEDULE B: CLIENT DISCLOSURE

Name of Lobbying Firm: CORTES COMMUNICATIONS, LLC

<b>CLIENT'S NAME:</b> <u>COMMUNITY FINANCIAL SERVICES ASSOCIATION</u>		<b>Telephone No.:</b> _____	
Client's Address	(Number & Street)	<u>Alexandria</u>	<u>VA</u> <u>22314</u>
		(City)	(State) (Zip)
Nature and Purpose of Client's Business: <u>TRADE ASSOCIATION.</u>			
Specific or General Municipal Decisions (see instructions): <u>ANY MATTER RELATED TO CREDIT, SHORT TERM LOANS AND CHECK CASHING.</u>			
Outcome(s) sought: <u>REASONABLE REGULATION.</u>			
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):			
<u>QC HOLDINGS, INC. , 66210~Overland</u>			
<u>DOLLAR FINANCIAL GROUP , 19312~Berwyn</u>			
<u>CHECK INTO CASH , 37364~Cleveland</u>			
(continued next box)			

<b>CLIENT'S NAME:</b> <u>COMMUNITY FINANCIAL SERVICES ASSOCIATION</u>		<b>Telephone No.:</b> _____	
Client's Address	(Number & Street)	<u></u>	<u></u> <u></u> <u></u>
		(City)	(State) (Zip)
Nature and Purpose of Client's Business: _____			
Specific or General Municipal Decisions (see instructions): <u>ANY MATTER RELATED TO CREDIT, SHORT TERM LOANS AND CHECK CASHING.</u>			
Outcome(s) sought: _____			
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):			
<u>ADVANCE AMERICA , 29306~Spartanburg</u>			
_____			
_____			

Comments: \_\_\_\_\_

If more space is needed, check box and attach continuation sheet(s).

# SCHEDULE B: CLIENT DISCLOSURE

Name of Lobbying Firm: CORTES COMMUNICATIONS, LLC

<b>CLIENT'S NAME:</b> <u>ECO-PEDICAB</u>		Telephone No.:	
Client's Address	(Number & Street)	<u>San Diego</u>	<u>CA</u> <u>92173</u>
		(City)	(State) (Zip)
Nature and Purpose of Client's Business: <u>PEDICAB TRANSPORTATION PROVIDER.</u>			
Specific or General Municipal Decisions (see instructions): <u>ADVOCATE FOR ADDITIONAL "RESTRICTED ZONE" PEDICAB PERMITS/LICENSES. ADVOCATE FOR THE CREATION OF AN ADDITIONAL "PEDICAB RESTRICTED ZONE" IN THE CITY OF SAN DIEGO, SPECIFICALLY FOR THE COMMUNITY OF SAN YSIDRO.</u>			
Outcome(s) sought: <u>THE SUCCESSFUL CREATION OF ADDITIONAL "RESTRICTED ZONE" PEDICAB PERMITS/LICENSES AND FOR THE SUCCESSFUL CREATION OF AN ADDITIONAL "PEDICAB RESTRICTED ZONE" IN THE CITY OF SAN DIEGO, SPECIFICALLY FOR THE COMMUNITY OF SAN YSIDRO.</u>			
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):			

<b>CLIENT'S NAME:</b> _____		Telephone No.:	
Client's Address	(Number & Street)	(City)	(State) (Zip)
Nature and Purpose of Client's Business: _____			
Specific or General Municipal Decisions (see instructions): _____			
Outcome(s) sought: _____			
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):			

Comments: \_\_\_\_\_

If more space is needed, check box and attach continuation sheet(s).



# SCHEDULE B: CLIENT DISCLOSURE

Name of Lobbying Firm: CORTES COMMUNICATIONS, LLC

<b>CLIENT'S NAME:</b> <u>MISSION BREWERY</u>	<b>Telephone No.:</b> _____		
Client's Address (Number & Street)	<u>San Diego</u> (City)	<u>CA</u> (State)	<u>92101</u> (Zip)
Nature and Purpose of Client's Business: <u>BEER MANUFACTURER.</u>			
Specific or General Municipal Decisions (see instructions): <u>SUPPORT FOR LIVE ENTERTAINMENT PERMIT AT 1441 L STREET, SAN DIEGO, CA 92101 AND MODIFICATION OF CIVIC SAN DIEGO PLANNED DISTRICT ORDINANCE - 156.0315 (A)(5)(A) ALCOHOL BEVERAGE SALES.</u>			
Outcome(s) sought: <u>APPROVAL OF LIVE ENTERTAINMENT PERMIT AT 1441 L STREET, SAN DIEGO, CA 92101 AND THE SUCCESSFUL MODIFICATION OF CIVIC SAN DIEGO'S PLANNED DISTRICT ORDINANCE - 156.0315 (A)(5)(A) ALCOHOL BEVERAGE SALES.</u>			
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions): _____ _____ _____			

<b>CLIENT'S NAME:</b> _____	<b>Telephone No.:</b> _____		
Client's Address (Number & Street)	_____ (City)	_____ (State)	_____ (Zip)
Nature and Purpose of Client's Business: _____			
Specific or General Municipal Decisions (see instructions): _____			
Outcome(s) sought: _____			
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions): _____ _____ _____			

Comments: \_\_\_\_\_

If more space is needed, check box and attach continuation sheet(s).

# SCHEDULE B: CLIENT DISCLOSURE

Name of Lobbying Firm: CORTES COMMUNICATIONS, LLC

<b>CLIENT'S NAME:</b> <u>UNITED ASSOCIATION OF FOOD TRUCKS OF SAN DIEGO CALIFORNIA</u>		<b>Telephone No.:</b> _____	
<b>Client's Address</b>	<b>(Number &amp; Street)</b>	<b>(City)</b>	<b>(State)</b>
		<u>Chula Vista</u>	<u>CA</u>
			<u>91911</u>
<b>Nature and Purpose of Client's Business:</b> <u>FOOD TRUCK INDUSTRY ASSOCIATION.</u>			
<b>Specific or General Municipal Decisions (see instructions):</b> <u>ANY MATTER RELATED TO THE FOOD TRUCK INDUSTRY.</u>			
<b>Outcome(s) sought:</b> <u>FAIR AND REASONABLE REGULATION FOR THE FOOD TRUCK INDUSTRY.</u>			
<p>If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):</p> <p>_____</p> <p>_____</p> <p>_____</p>			

<b>CLIENT'S NAME:</b> _____		<b>Telephone No.:</b> _____	
<b>Client's Address</b>	<b>(Number &amp; Street)</b>	<b>(City)</b>	<b>(State)</b>
<b>Nature and Purpose of Client's Business:</b> _____			
<b>Specific or General Municipal Decisions (see instructions):</b> _____			
<b>Outcome(s) sought:</b> _____			
<p>If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):</p> <p>_____</p> <p>_____</p> <p>_____</p>			

Comments: \_\_\_\_\_

If more space is needed, check box and attach continuation sheet(s).



# SCHEDULE B: CLIENT DISCLOSURE

Name of Lobbying Firm: CORTES COMMUNICATIONS, LLC

<b>CLIENT'S NAME:</b> <u>GREYHOUND BUS LINES</u>		<b>Telephone No.:</b> _____	
Client's Address	(Number & Street)	<u>San Diego</u>	<u>CA</u> <u>92101</u>
		(City)	(State) (Zip)
Nature and Purpose of Client's Business: <u>TRANSPORTATION CARRIER.</u>			
Specific or General Municipal Decisions (see instructions): <u>ANY MATTER RELATED TO MUNICIPAL BUS TRANSPORTATION RULES AND REGULATIONS.</u>			
Outcome(s) sought: <u>FAIR AND REASONABLE REGULATION.</u>			
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions): _____ _____ _____			

<b>CLIENT'S NAME:</b> _____		<b>Telephone No.:</b> _____	
Client's Address	(Number & Street)	(City)	(State) (Zip)
Nature and Purpose of Client's Business: _____			
Specific or General Municipal Decisions (see instructions): _____			
Outcome(s) sought: _____			
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions): _____ _____ _____			

Comments: \_\_\_\_\_

If more space is needed, check box and attach continuation sheet(s).

# SCHEDULE B: CLIENT DISCLOSURE

Name of Lobbying Firm: CORTES COMMUNICATIONS, LLC

<b>CLIENT'S NAME:</b> <u>SAN DIEGO HOSPITALITY &amp; ENTERTAINMENT COALITION</u> Telephone No.: _____			
Client's Address	(Number & Street)	<u>San Diego</u> (City)	<u>CA</u> (State) <u>92111</u> (Zip)
Nature and Purpose of Client's Business: <u>INDUSTRY ASSOCIATION.</u>			
Specific or General Municipal Decisions (see instructions): <u>ANY MATTER RELATED TO THE ADULT / NUDE ENTERTAINMENT INDUSTRY.</u>			
Outcome(s) sought: <u>FAIR AND REASONABLE REGULATION.</u>			
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):			
<u>RED EYE JACKS, INC . San Diego, CA 92111</u>			
<u>MIDWAY VENTURE, LLC . San Diego, CA 92110</u>			
<u>SHOW GIRLS OF SAN DIEGO, INC . San Diego, CA 92110</u>			
(continued next box)			

<b>CLIENT'S NAME:</b> <u>SAN DIEGO HOSPITALITY &amp; ENTERTAINMENT COALITION</u> Telephone No.: _____			
Client's Address	(Number & Street)	(City)	(State) (Zip)
Nature and Purpose of Client's Business: _____			
Specific or General Municipal Decisions (see instructions): <u>ANY MATTER RELATED TO THE ADULT / NUDE ENTERTAINMENT INDUSTRY.</u>			
Outcome(s) sought: _____			
If this client is a coalition or membership organization, state the name, address, and telephone number of each member of the coalition who has reached the \$1,000 threshold (see instructions):			
<u>KNIGHTS KEARNY VILLA, INC . San Diego, CA 92123</u>			

Comments: \_\_\_\_\_

If more space is needed, check box and attach continuation sheet(s).

# SCHEDULE C: ACTIVITIES DISCLOSURE

Name of Lobbying Firm: CORTES COMMUNICATIONS, LLC

## PART 1 – FUNDRAISING ACTIVITIES

**Identify Fundraising Activities.** List each owner, compensated officer, and lobbyist in the firm who engaged in “fundraising activities” for a current elected City Official or a committee primarily formed to support a current elected City Official within the last two years\*, along with the name of the City Official.

<u>Name of Individual</u>	<u>Name of Current Elected City Official</u>
_____	fundraised for: _____
_____	fundraised for: _____
_____	fundraised for: _____
_____	fundraised for: _____

## PART 2 – CAMPAIGN SERVICES

**Identify Campaign Services.** List each owner, compensated officer, and lobbyist in the firm who provided compensated campaign-related services to a current elected City Official within the last two years\*, along with the name of the City Official. (Note that compensation includes “win bonuses.”)

<u>Name of Individual</u>	<u>Name of Current Elected City Official</u>
_____	worked for: _____
_____	worked for: _____
_____	worked for: _____
_____	worked for: _____

## PART 3 – CONTRACT SERVICES

**Identify Contract Services.** List each owner, compensated officer, and lobbyist in the firm who provided compensated services under a City employment or consultant contract within the past two years\*.

<u>Name of Individual</u>	<u>Name of City Department, Agency, or Board</u>
<u>MARCO POLO CORTES</u>	worked for: <u>PUBLIC UTILITIES DEPARTMENT</u>
_____	worked for: _____
_____	worked for: _____
_____	worked for: _____

\* The two year period is based on when the firm registers, except that when filing an amendment to add a new owner, compensated officer, or lobbyist the two year period for the added person is based on the date of the amendment.

Comments: \_\_\_\_\_

If more space is needed, check box and attach continuation sheet(s).