RECEIVED CITY OF IRVINE

LOBBYIST QUARTERLY REPORT OF ACTIVITY 2021 OCT 12 AM 9: 27

INSTRUCTIONS:

Complete and return this form to:

CITY OF IRVINE City Clerk's Office P.O. Box 19575 Irvine, CA 92623-9575

CHECK APPLICABLE REPORTING PERIO	D:			
Due April 15 (January 1 - Marc	:h 31)			
Due July 15 (April 1 - June 30)				
Due October 15 (July 1 - Septe	ember 30)			
Due January 15 (October 1 - D	ecember 31)			
	uarter. There is no	fee due with qua	compensation of \$10,000 or more was terly reports. However, if the report is y Council Resolution 06-26.	
SECTION 1 - REGISTR <i>E</i>	NT LOBBY	IST INFO	RMATION	
NAME OF REGISTRANT			BUSINESS PHONE	
Roger S. Faubel			(949) 584-4978	
BUSINESS ADDRESS			BUSINESS FAX	
27758 Santa Margarita Parkway, Suite 343				
CITY	STATE	ZIP	BUSINESS E-MAIL	
Mission Viejo	California	92691	roger@faubelpa.com	
DESCRIBE NATURE OF YOUR BUSINESS				
Government Affairs Consulting				
NAME/POSITION OF EACH CITY OFFICIAL	OR CITY OFFICIAL'S	RELATIVE WHO I	S EMPLOYED BY THE REGISTRANT	
N.A.				
IF REGISTRANT OR EMPLOYEE OF REGISTI THE PAST YEAR	RANT IS A FORMER (CITY OFFICIAL OR	EMPLOYEE, LIST POSITION(S) HELD DU	JRING
N.A.				
I AM FAMILIAR WITH THE PROVISIO ACTIVITIES WILL NOT VIOLATE THOSE		1-6-107 OF THE	IRVINE MUNICIPAL CODE. MY LO	OBBYING
Joger Stan	ale		10/8/2021	
REGISTRANT JOBBYIST SIGNATURE			DATE	

SECTION 2 - REGISTRA	ANT'S CLIE	NT INFOR	MATION
Complete this section to:			SELECT ONE:
1. Provide information for <u>each</u> new Clier	nt since your last rep	oort filed.	☐ NEW CLIENT
-AND/OR- 2. Report any changes in information for	each existing Client	since your	IF NEW, DATE QUALIFIED:
last report filed.	cach existing cheric	Since your	
This page	may be duplicated i	for each Client.	☐ NO NEW INFORMATION TO REPORT
CLIENT NAME			PHONE
Waste Management			(714) 480-2315
ADDRESS			DESCRIBE NATURE OF CLIENT'S BUSINESS
1800 South Grand Avenue			Solid and Waste Recycling
CITY	STATE	ZIP	
Santa Ana	California	92705	
NAME OF PERSON, OTHER THAN CLIENT,	ON WHOSE BEHALF	REGISTRANT HAS	BEEN ENGAGED BY CLIENT TO LOBBY
N.A.			
			Y TO THE COMPENSATION OF REGISTRANT, OR
IN MAJOR PART PLANS, SUPERVISES, OR C	LONTROLS REGISTR	AINT S LOBBYING F	ACTIVITIES ON BEHALF OF CLIENT
N.A.			
NAME OF LOBBYING FIRM FOR WHICH RE	GISTRANT IS AN AG	SENT OR EMPLOYE	E WITH RESPECT TO CLIENT
Faubel Public Affairs			
NAME OF EACH AGENT OR EMPLOYEE OF	REGISTRANT EXPE	CTED TO ACT AS A	A LOBBYIST ON BEHALF OF CLIENT
Roger S. Faubel			
BRIEF DESCRIPTION OF ALL MUNICIPAL OF FORSEEABLY LOBBY FOR ON BEHALF OF		ed by Irvine Munic	cipal Code Section 1-7-102) REGISTRANT WILL
Discussion of Wasta Management Consists			
Discussion of Waste Management Services.			
L			

SECTION 3 - LOBBYING ACTIVITIES

Lobbying activities must be reported for <u>each</u> Client for which compensation of \$10,000 or more was received during the calendar quarter in question.

Identify the Client represented. List all issues, including municipal questions, upon which lobbying activities were engaged, including, a list of specific legislative proposals and other proposed, pending or completed official actions that occurred during this reporting period.

This page may be duplicated as needed.

NAME OF CLIENT ON WHOSE BEHALF LOBBYING WAS CONDUCTED	
Waste Management	
NO REPORTABLE ACTIVITIY FOR THIS REPORTING PERIOD. NAME OF EMPLOYEE/AGENT WHO ACTED AS LOBBYIST	
DESCRIPTION OF ISSUE/MUNICIPAL QUESTION	
DATE OF CONTACT CITY OFFICIAL CONTACTED	TITLE OF CITY OFFICIAL CONTACTED
	8
OUTCOME OF CONTACT	
NAME OF CLIENT ON WHOSE BEHALF LOBBYING WAS CONDUCTED	
NO REPORTABLE ACTIVITIY FOR THIS REPORTING PERIOD.	
NAME OF EMPLOYEE/AGENT WHO ACTED AS LOBBYIST	
DESCRIPTION OF ISSUE/MUNICIPAL QUESTION	
DATE OF CONTACT CITY OFFICIAL CONTACTED	TITLE OF CITY OFFICIAL CONTACTED
OUTCOME OF CONTACT	

SECTION 4 - VERIFICATION OF REGISTRANT

I HAVE USED ALL REASONABLE DILIGENCE IN PREPARING THIS REPORT AND EACH OF THE SECTIONS HEREOF, AND I HAVE PERSONAL KNOWLEDGE OF THE MATTERS CONTAINED IN THIS REPORT.

I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT.

REGISTRANT LOBBYIST SIGNATIORE 10/8/2021

DATE

NOTE: A Basic Guide to Lobbying Registration and Disclosure in the City of Irvine, and the required registration and reporting forms are available by calling the City Clerk's Office at (949) 724-6205, or online at www.ci.irvine.ca.us.



TERMINATION OF:

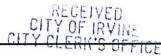
 ☐ Registrant Lobbyist ☑ Client
INSTRUCTIONS: Complete and return to: City of Irvine - Office of the City Clerk One Civic Center Plaza Irvine, CA 92623-9575
Please note: The filing of this Notice of Termination does not relieve the registrant of reporting requirements imposed for the reporting period in question.
PART I TERMINATING REGISTRANT LOBBYIST / CLIENT INFORMATION
Name of Registrant Lobbyist: Roger S. Faubel Faubel Public Affair If individual, include first, last and middle initial
Name of Terminating Client (If Applicable): Tierra Verde Industries
Business Address: P.O. Box 279 Irvine CA 92650
Business E-mail Address:
Business Phone Number: 949-551-0363
Termination date: July 1, 2021
PART II VERIFICATION OF REGISTRANT
I have used all reasonable diligence in preparing this report and I have personal knowledge of the matters contained in this report. I certify under penalty of perjury under the laws of the State of California that the forgoing is true and correct.
Date Signature of Registrant Lobbyist
Faubel Public Affairs Name of Lobbying Firm
rianic of Lobbying Finn



TERMINATION OF:

Name of Lobbying Firm





INSTRU	CTI	ONS:
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Complete and return this form to:

CITY OF IRVINE
City Clerk's Office
P.O. Box 19575

Irvine, CA 92623-9575

CHECK /	APPLICABLE REPORTING F	PERIOD:			
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	☑ Due October 15 (July 1 -				
	Due January 15 (Octobe				
(during the applicable calen	dar quarter. There is	no fee due with	hich compensation of \$10,000 or more was quarterly reports. However, if the report is er City Council Resolution 06-26.	received not filed
SECT	ION 1 - REGIS	TRANT LOB	BYIST IN	FORMATION	
NAME O	F REGISTRANT			BUSINESS PHONE	
Curt Prin	gle & Associates			(714) 939-9070	
BUSINES	SS ADDRESS			BUSINESS FAX	
1801 E. K	Catella Avenue, Suite 1002			(714) 939-9080	
CITY		STATE	ZIP	BUSINESS E-MAIL	
Anaheir	m	California	92805	paul@curtpringle.com	
DESCRIE	BE NATURE OF YOUR BUSIN	ESS			
PR Firm					
NAME/P	OSITION OF EACH CITY OF	FICIAL OR CITY OFFICE	AL'S RELATIVE W	HO IS EMPLOYED BY THE REGISTRANT	
N/A					
IF REGIS		EGISTRANT IS A FORM	MER CITY OFFICIA	L OR EMPLOYEE, LIST POSITION(S) HELD DUI	RING
N/A					
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	ITAL /			10/07/2021	
REGISTE	RANT LOBBYIST SIGNATURE			DATE	

SECTION 2 - REGISTRA	ANT'S CL	IENT INFOR	MATION
Complete this section to:			SELECT ONE:
1. Provide information for <u>each</u> new Clie	nt since your las	t report filed.	☐ NEW CLIENT
-AND/OR- 2. Report any changes in information for	r each evisting (I	ient since your	IF NEW, DATE QUALIFIED:
last report filed.	each existing Ci	ient since your	EXISTING CLIENT
This pag	e may be duplica	ted for each Client.	☐ NO NEW INFORMATION TO REPORT
CLIENT NAME			PHONE
Orange County Soccer Club			(949) 647-4625
ADDRESS			DESCRIBE NATURE OF CLIENT'S BUSINESS
20 Fairbanks, Suite 181			Professional Soccer Club
CITY	STATE	ZIP	
Irvine	California	92618	
NAME OF PERSON, OTHER THAN CLIENT,	ON WHOSE BEH	ALF REGISTRANT HA	S BEEN ENGAGED BY CLIENT TO LOBBY
N/A			
NAME OF LOBBYING FIRM FOR WHICH R Curt Pringle & Associates NAME OF EACH AGENT OR EMPLOYEE O Curt Pringle			
BRIEF DESCRIPTION OF ALL MUNICIPAL OF FORSEEABLY LOBBY FOR ON BEHALF OF The use of the Championship Soccer Stadius	CLIENT		icipal Code Section 1-7-102) REGISTRANT WILL

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NAME OF CLIENT ON V	WHOSE BEHALF LOBBYING WAS CONDUCTED	
Orange County Soccer (Club	
NO REPORTABLE A	ACTIVITIY FOR THIS REPORTING PERIOD.	
NAME OF EMPLOYEE/	AGENT WHO ACTED AS LOBBYIST	
DESCRIPTION OF ISSU	E/MUNICIPAL QUESTION	
DATE OF CONTACT	CITY OFFICIAL CONTACTED	TITLE OF CITY OFFICIAL CONTACTED
DATE OF CONTACT	CITT OFFICIAL CONTACTED	THEE OF CITY OFFICIAL CONTACTED
OUTCOME OF CONTA	CT	
NAME OF CLIENT ON	WHOSE BEHALF LOBBYING WAS CONDUCTED	
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NAME OF EMPLOYEE/	AGENT WHO ACTED AS LOBBYIST	
DESCRIPTION OF ISSU	E/MUNICIPAL QUESTION	
DATE OF CONTACT	CITY OFFICIAL CONTACTED	TITLE OF CITY OFFICIAL CONTACTED
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OUTCOME OF CONTA	CT	
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REGISTRANT LOBBYIST SIGNATURE

10/07/2021

DATE

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LOBBYIST QUARTERLY REPORT OF ACTIVITY

2021 OCT 18 AM 9: 49

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Due July 15 (April 1 - June 30)

✓ Due October 15 (July 1 - September 30)✓ Due January 15 (October 1 - December 31)

CITY OF IRVINE City Clerk's Office P.O. Box 19575 Irvine, CA 92623-9575

during the applicable	e calendar quarter. There is	no fee due with	quarterly reports. However, if the report is not fi er City Council Resolution 06-26.	
SECTION 1 - RE	GISTRANT LOB	BYIST IN	FORMATION	
NAME OF REGISTRANT			BUSINESS PHONE	
Sapetto Real Estate Solutions			(949) 252-0841	
BUSINESS ADDRESS			BUSINESS FAX	
One Park Plaza, Suite 600PMB3	13			
CITY	STATE	ZIP	BUSINESS E-MAIL	
Irvine	California	92614	psapetto@sapettorealestate.com	
DESCRIBE NATURE OF YOUR	BUSINESS			
Land Use Entitlement				
NAME/POSITION OF EACH C	ITY OFFICIAL OR CITY OFFICI	AL'S RELATIVE W	HO IS EMPLOYED BY THE REGISTRANT	
N/A				
IF REGISTRANT OR EMPLOYE THE PAST YEAR	E OF REGISTRANT IS A FORM	MER CITY OFFICIA	L OR EMPLOYEE, LIST POSITION(S) HELD DURING	
N/A				
I AM FAMILIAR WITH THE ACTIVITIES WILL NOT VIOL		ON 1-6-107 OF	THE IRVINE MUNICIPAL CODE. MY LOBBYI	NG
(aluela)	QHO		10-13-2021	
REGISTRANT LOBBYIST SIGN	ATURE		DATE	

Complete this section to:		LIENT INFO	RMATION
			SELECT ONE:
 Provide information for <u>each</u> new - -AND/OR- 	Client since your la	st report filed.	☐ NEW CLIENT
Report any changes in information	n for each <i>existina</i> (lient since your	IF NEW, DATE QUALIFIED:
last report filed.	<u>sassi</u> onisting s	and it amine your	EXISTING CLIENT
This	page may be duplic	ated for each Client.	NO NEW INFORMATION TO REPORT
CLIENT NAME			PHONE
Concordia University			(949) 854-8002
ADDRESS			DESCRIBE NATURE OF CLIENT'S BUSINESS
1330 Concordia West			University
CITY	STATE	ZIP	
Irvine	California	92612	
NAME OF PERSON, OTHER THAN CLI	ENT, ON WHOSE BE	HALF REGISTRANT HA	AS BEEN ENGAGED BY CLIENT TO LOBBY
None			
NAME OF LOBBYING FIRM FOR WHIC	TH REGISTRANT IS A	N AGENT OR EMPLOY	'EE WITH RESPECT TO CLIENT
Sapetto Real Estate Solutions, Inc			
Sapetto Real Estate Solutions, Inc NAME OF EACH AGENT OR EMPLOYE			
Sapetto Real Estate Solutions, Inc			
Sapetto Real Estate Solutions, Inc NAME OF EACH AGENT OR EMPLOYE Pamela Sapetto, Andrea Maloney BRIEF DESCRIPTION OF ALL MUNICIP	E OF REGISTRANT	EXPECTED TO ACT AS	
Sapetto Real Estate Solutions, Inc NAME OF EACH AGENT OR EMPLOYE Pamela Sapetto, Andrea Maloney	E OF REGISTRANT	EXPECTED TO ACT AS	A LOBBYIST ON BEHALF OF CLIENT

SECTION 2 - REGISTRA	ANT'S CL	IENT INFOR	RMATION
Complete this section to: 1. Provide information for <u>each new</u> Client since your last report filed.			SELECT ONE:
-AND/OR-	☐ NEW CLIENT		
2. Report any changes in information for	each existing C	lient since your	IF NEW, DATE QUALIFIED:
last report filed.			EXISTING CLIENT
This page	e may be duplica	ited for each Client.	NO NEW INFORMATION TO REPORT
CLIENT NAME			PHONE
Desmond Ventures			(714) 569-1000
ADDRESS			DESCRIBE NATURE OF CLIENT'S BUSINESS
611 E Fourth Street, Suite 200			Property Owner
CITY	STATE	ZIP	
Santa Ana	California	92701	
NAME OF PERSON, OTHER THAN CLIENT,	ON WHOSE BEI	HALF REGISTRANT HA	S BEEN ENGAGED BY CLIENT TO LOBBY
None			
NAME OF LOBBYING FIRM FOR WHICH RI	FGISTRANT IS A	N AGENT OR EMPLOY	EE WITH DECRECT TO CLIENT
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FORSEEABLY LOBBY FOR ON BEHALF OF	QUESTIONS (as of CLIENT	defined by Irvine Muni	icipal Code Section 1-7-102) REGISTRANT WILL
Land Use Entitlement			
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SECTION 2 - REGISTRA	ANT'S CL	IENT INFOR	MATION		
Complete this section to:			SELECT ONE:		
1. Provide information for <u>each</u> new Clier	☐ NEW CLIENT				
-AND/OR-	and suisting Cli		IF NEW, DATE QUALIFIED:		
Report any changes in information for <u>each</u> existing Client since your last report filed.			EXISTING CLIENT		
This page	may be duplicat	ted for each Client.	☑ NO NEW INFORMATION TO REPORT		
CLIENT NAME			PHONE		
Garden Communities			(858) 200-2244		
ADDRESS			DESCRIBE NATURE OF CLIENT'S BUSINESS		
9110 Judicial Drive			Developer and Property Owner		
CITY	STATE	ZIP			
San Diego	California	92122			
NAME OF PERSON, OTHER THAN CLIENT,	ON WHOSE BEH	IALF REGISTRANT HA	S BEEN ENGAGED BY CLIENT TO LOBBY		
None					
NAME OF ANY PERSON, KNOWN BY REGISTRANT, TO CONTRIBUTE FINANCIALLY TO THE COMPENSATION OF REGISTRANT, C IN MAJOR PART PLANS, SUPERVISES, OR CONTROLS REGISTRANT'S LOBBYING ACTIVITIES ON BEHALF OF CLIENT None NAME OF LOBBYING FIRM FOR WHICH REGISTRANT IS AN AGENT OR EMPLOYEE WITH RESPECT TO CLIENT Sapetto Real Estate Solutions, Inc NAME OF EACH AGENT OR EMPLOYEE OF REGISTRANT EXPECTED TO ACT AS A LOBBYIST ON BEHALF OF CLIENT Pamela Sapetto, Andrea Maloney					

SECTION 2 - REGISTRA	NT'S CLI	ENTINFOR	MATION
Complete this section to: 1. Provide information for <u>each</u> new Client since your last report filed. -AND/OR-			SELECT ONE: NEW CLIENT
Report any changes in information for last report filed. This are a second as a second are a second as a second are			IF NEW, DATE QUALIFIED: EXISTING CLIENT
	may be duplicated	for each Client.	NO NEW INFORMATION TO REPORT
CLIENT NAME			PHONE
Hines			(949) 313-2206
ADDRESS			DESCRIBE NATURE OF CLIENT'S BUSINESS
4000 MacArthur Blvd, Suite 110			Development and Property Management
CITY	STATE	ZIP	
Newport Beach	California	92660	
NAME OF PERSON, OTHER THAN CLIENT,	ON WHOSE BEHA	LF REGISTRANT HA	S BEEN ENGAGED BY CLIENT TO LOBBY
NAME OF LOBBYING FIRM FOR WHICH RE	GISTRANT IS AN A	GENT OR EMPLOY	EE WITH RESPECT TO CLIENT
Sapetto Real Estate Solutions, Inc			
NAME OF EACH AGENT OR EMPLOYEE OF	REGISTRANT EXP	PECTED TO ACT AS	A LOBBYIST ON BEHALF OF CLIENT
Pamela Sapetto, Andrea Maloney			
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Land Use Entitlement			

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each existing Clie	ent since your	EXISTING CLIENT	
e may be duplicate	ed for each Client.	NO NEW INFORMATION TO REPORT	
		PHONE	
		(949) 297-7000	
		DESCRIBE NATURE OF CLIENT'S BUSINESS	
		Medical Device Manufacturer	
STATE	ZIP		
California	92618		
ON WHOSE BEHA	ALF REGISTRANT HAS	S BEEN ENGAGED BY CLIENT TO LOBBY	
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SECTION 2 - REGISTR	ANT'S CLI	ENT INFOR	MATION
Complete this section to:	SELECT ONE:		
1. Provide information for <u>each</u> new Clier	☐ NEW CLIENT		
-AND/OR- 2. Report any changes in information for <u>each</u> existing Client since your			IF NEW, DATE QUALIFIED:
last report filed.	each existing Clief	it since your	EXISTING CLIENT
This page	may be duplicated	d for each Client.	⋈ NO NEW INFORMATION TO REPORT
CLIENT NAME			PHONE
Newport Mesa Church			(949) 242-1715
ADDRESS			DESCRIBE NATURE OF CLIENT'S BUSINESS
2599 Newport Blvd			Church
CITY	STATE	ZIP	
Costa Mesa	California	92626	
NAME OF PERSON, OTHER THAN CLIENT,	ON WHOSE BEHA	LF REGISTRANT HAS	S BEEN ENGAGED BY CLIENT TO LOBBY
None			
NAME OF LOBBYING FIRM FOR WHICH RE	GISTRANT IS AN A	GENIT OR EMBLOYE	E WITH DECRECATO CLUENT
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NAME OF EACH AGENT OR EMPLOYEE OF	REGISTRANT EXP	PECTED TO ACT AS	A LORRYIST ON REHALE OF CLIENT
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FORM 10-01 REV 04/1.

PAGE 3 of ...

including, a list of sp	ecific legislative proposals and other prop	pal questions, upon which lobbying activities were engaged posed, pending or completed official actions that occurre
during this reporting	period.	This page may be duplicated as neede:
NAME OF CLIENT ON V	WHOSE BEHALF LOBBYING WAS CONDUCT	ED
Concordia University		
NO REPORTABLE A	CTIVITIY FOR THIS REPORTING PERIOD.	
	AGENT WHO ACTED AS LOBBYIST	
DESCRIPTION OF ISSU	E/MUNICIPAL QUESTION	
DATE OF CONTACT	CITY OFFICIAL CONTACTED	TITLE OF CITY OFFICIAL CONTACTED
OUTCOME OF CONTA	d .	
NAME OF CLIENT ON V	VHOSE BEHALF LOBBYING WAS CONDUCT	ED
Desmond Ventures		
NO REPORTABLE A	CTIVITIY FOR THIS REPORTING PERIOD.	
NAME OF EMPLOYEE	AGENT WHO ACTED AS LOBBYIST	
DESCRIPTION OF ISSU	E/MUNICIPAL QUESTION	
DATE OF CONTACT	CITY OFFICIAL CONTACTED	TITLE OF CITY OFFICIAL CONTACTED
OUTCOME OF CONTAC	T. C.	

Lobbying activities must be reported for each Client for which compensation of \$10,000 or more was received during the

SECTION 3 - LOBBYING ACTIVITIES

calendar quarter in question.

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Garden Communities			
NO REPORTABLE A	ACTIVITIY FOR THIS REPORTING PERIOD.		
	AGENT WHO ACTED AS LOBBYIST		-
DESCRIPTION OF ISSU	E/MUNICIPAL QUESTION		
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DATE OF CONTACT	CITY OFFICIAL CONTACTED	TITLE OF CITY OFFICIAL CONTACTED	
OUTCOME OF CONTA	CT		
NAME OF CLIENT ON	WHOSE BEHALF LOBBYING WAS CONDUC	TED	
Hines			
NO REPORTABLE A	CTIVITIY FOR THIS REPORTING PERIOD.		
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DATE OF CONTACT	CITT OFFICIAL CONTACTED	TITLE OF CITY OFFICIAL CONTACTED	
OUTCOME OF CONTA	Cl		
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SECTION 3 - LOBBYING ACTIVITIES

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Masimo		
NO REPORTABLE ACT	VITIY FOR THIS REPORTING PERIOD.	
	ENT WHO ACTED AS LOBBYIST	
DESCRIPTION OF ISSUE/N	MUNICIPAL QUESTION	
DATE OF CONTACT C	ITY OFFICIAL CONTACTED	TITLE OF CITY OFFICIAL CONTACTED
OUTCOME OF CONTACT		
NAME OF CLIENT ON WE	IOSE BEHALF LOBBYING WAS CONDUCT	ED
Newport Mesa Church		
	•	
	TIVITIY FOR THIS REPORTING PERIOD.	
NAME OF EMPLOYEE/AC	SENT WHO ACTED AS LOBBITST	
DESCRIPTION OF ISSUE/	MUNICIPAL QUESTION	
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OUTCOME OF CONTACT		

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☐ Due July 15 (April 1 - June 30))				
☐ Due October 15 (July 1 - Sept	ember 30)				
☐ Due January 15 (October 1 - E	December 31)				
NOTE: This report is required for lobbying during the applicable calendar quby the due date, it will be subject	uarter. There is no	fee due with quar	terly reports. Hov	vever, if the repo	
SECTION 1 - REGISTRA	ANT LOBBY	IST INFO	RMATION		
NAME OF REGISTRANT	The state of the s		BUSINESS PHONE		
Starpointe Ventures			(949) 622-0420		
BUSINESS ADDRESS			BUSINESS FAX		
5030 Campus Drive, Suite B			A parameter of the state of the		
CITY	STATE	ZIP	BUSINESS E-MAIL		
Newport Beach	California	92660	tj@starpointeventures.com		
DESCRIBE NATURE OF YOUR BUSINESS					
Real Estate Consulting					
NAME/POSITION OF EACH CITY OFFICIAL	OR CITY OFFICIAL'S	RELATIVE WHO IS	EMPLOYED BY TH	HE REGISTRANT	
N\A					
IF REGISTRANT OR EMPLOYEE OF REGIST THE PAST YEAR	RANT IS A FORMER	CITY OFFICIAL OR	EMPLOYEE, LIST P	OSITION(S) HELI	D DURING
N\A					
I AM FAMILIAR WITH THE PROVISION ACTIVITIES WILL NOT VIOLATE THOSE		1-6-107 OF THE	IRVINE MUNICIF	PAL CODE. M	Y LOBBYING
T- STREELL			1	0/05/2021	
REGISTRANT LOBBYIST SIGNATURE DATE				ATE	

SECTION 2 - REGISTRA	ANT'S CLIE	NT INFOR	MATION
Complete this section to:	SELECT ONE:		
1. Provide information for <u>each</u> new Client since your last report filed.			☐ NEW CLIENT
-AND/OR- 2. Report any changes in information for	IF NEW, DATE QUALIFIED:		
last report filed.	each existing chem	t since your	EXISTING CLIENT
This page	e may be duplicated	for each Client.	NO NEW INFORMATION TO REPORT
CLIENT NAME			PHONE
Heritage Fields El Toro, LLC			
ADDRESS			DESCRIBE NATURE OF CLIENT'S BUSINESS
CITY	STATE	ZIP	
NAME OF PERSON, OTHER THAN CLIENT,	ON WHOSE BEHAL	F REGISTRANT HAS	S BEEN ENGAGED BY CLIENT TO LOBBY
			LY TO THE COMPENSATION OF REGISTRANT, OR
IN MAJOR PART PLANS, SUPERVISES, OR	CONTROLS REGISTE	RANT'S LOBBYING	ACTIVITIES ON BEHALF OF CLIENT
NAME OF LOBBYING FIRM FOR WHICH RI	EGISTRANT IS AN AC	GENT OR EMPLOYE	EE WITH RESPECT TO CLIENT
NAME OF EACH AGENT OR EMPLOYEE O	F REGISTRANT EXPI	ECTED TO ACT AS A	A LOBBYIST ON BEHALF OF CLIENT
Charles and the			
BRIEF DESCRIPTION OF ALL MUNICIPAL OF FORSEEABLY LOBBY FOR ON BEHALF OF		ned by Irvine Muni	cipal Code Section 1-7-102) REGISTRANT WILL

SECTION 3 - LOBBYING ACTIVITIES

Lobbying activities must be reported for <u>each</u> Client for which compensation of \$10,000 or more was received during the calendar quarter in question.

Identify the Client represented. List all issues, including municipal questions, upon which lobbying activities were engaged, including, a list of specific legislative proposals and other proposed, pending or completed official actions that occurred during this reporting period.

This page may be duplicated as needed.

NAME OF CLIENT ON V	VHOSE BEHALF LOBBYING WAS CONDUC	CTED	
Heritage Fields El Toro, L	LC		
NO REPORTABLE A	CTIVITIY FOR THIS REPORTING PERIOD.		
	AGENT WHO ACTED AS LOBBYIST		
Patrick Strader			
DESCRIPTION OF ISSUI	E/MUNICIPAL QUESTION		
		rating against the appeal of Great Park Neighbo and 19121 (00826522-PTT) and attendance at t	
DATE OF CONTACT	CITY OFFICIAL CONTACTED	TITLE OF CITY OFFICIAL CONT	ACTED-
OUTCOME OF CONTAC			
NAME OF CLIENT ON V	VHOSE BEHALF LOBBYING WAS CONDUC	ITED	
NO REPORTABLE A	CTIVITIY FOR THIS REPORTING PERIOD.		
NAME OF EMPLOYEE//	AGENT WHO ACTED AS LOBBYIST		
DESCRIPTION OF ISSUE	E/MUNICIPAL QUESTION		
A			
DATE OF CONTACT	CITY OFFICIAL CONTACTED	TITLE OF CITY OFFICIAL CONT	ACTED
OUTCOME OF CONTAC	T		

SECTION 4 - VERIFICATION OF REGISTRANT

I HAVE USED ALL REASONABLE DILIGENCE IN PREPARING THIS REPORT AND EACH OF THE SECTIONS HEREOF, AND I HAVE PERSONAL KNOWLEDGE OF THE MATTERS CONTAINED IN THIS REPORT.

I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT.

T=Street		10/05/2021
REGISTRANT LOBBYIST SIGN	ATURE	DATE

NOTE: A Basic Guide to Lobbying Registration and Disclosure in the City of Irvine, and the required registration and reporting forms are available by calling the City Clerk's Office at (949) 724-6205, or online at www.ci.irvine.ca.us.

2021 OCT 12 AM 9: 27

LOBBYIST QUARTERLY REPOR

INSTRU	JCTI	ON	S:
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Complete and return this form to:

Due April 15 (January 1 - March 31)

CHECK APPLICABLE REPORTING PERIOD:

CITY OF IRVINE City Clerk's Office P.O. Box 19575

Irvine, CA 92623-9575

Due July 15 (April 1 - Jun	e 30)				
Due October 15 (July 1 -	September 30)				
Due January 15 (Octobe	r 1 - December 31)				
during the applicable calen	dar quarter. There is	s no fee due with	hich compensation of \$10,000 or more quarterly reports. However, if the reports However, if the reports of the reports of the report of the re		
SECTION 1 - REGIST	TRANT LOB	BYIST IN	FORMATION		
NAME OF REGISTRANT			BUSINESS PHONE		
Peter Whittingham			(949) 280-9181	(949) 280-9181	
BUSINESS ADDRESS	USINESS ADDRESS			BUSINESS FAX	
31441 Santa Margarita Parkway, Suite A	A181				
CITY	STATE	ZIP	BUSINESS E-MAIL		
Rancho Santa Margarita	California	92688	peter@whittinghampaa.com		
DESCRIBE NATURE OF YOUR BUSINE	ESS				
Public Affairs/Government Relations Ad	dvocacy			Jer Karende	
NAME/POSITION OF EACH CITY OFF	ICIAL OR CITY OFFIC	IAL'S RELATIVE W	HO IS EMPLOYED BY THE REGISTRANT		
IF REGISTRANT OR EMPLOYEE OF RE THE PAST YEAR	EGISTRANT IS A FORM	MER CITY OFFICIA	L OR EMPLOYEE, LIST POSITION(S) HELE	D DURING	
I AM FAMILIAR WITH THE PROVACTIVITIES WILL NOT VIOLATE THE		ON 1-6-107 OF	THE IRVINE MUNICIPAL CODE. M 10/06/2021 DATE	Y LOBBYING	
TEGISTIANT EODDTIST SIGNATURE			DATE		

SECTION 2 - REGISTRA	ANT'S CLIE	NT INFOR	MATION
Complete this section to:			SELECT ONE:
1. Provide information for <u>each</u> new Client since your last report filed.		port filed.	☐ NEW CLIENT
-AND/OR- 2. Report any changes in information for <u>each</u> <i>existing</i> Client since your last report filed.		t since vour	IF NEW, DATE QUALIFIED:
		e sirree your	EXISTING CLIENT
This page	may be duplicated	for each Client.	NO NEW INFORMATION TO REPORT
CLIENT NAME			PHONE
Crown Castle			(949) 310-6924
ADDRESS			DESCRIBE NATURE OF CLIENT'S BUSINESS
200 Spectrum Center Dr., Suite 1800			Wireless Infrastructure Deployment
CITY	STATE	ZIP	
Irvine	California	92618	
NAME OF PERSON, OTHER THAN CLIENT,	ON WHOSE BEHAL	F REGISTRANT HAS	S BEEN ENGAGED BY CLIENT TO LOBBY
NAME OF LOBBYING FIRM FOR WHICH RE			
BRIEF DESCRIPTION OF ALL MUNICIPAL C FORSEEABLY LOBBY FOR ON BEHALF OF Environmental analyses/Transportation impr	CLIENT	ned by Irvine Muni	icipal Code Section 1-7-102) REGISTRANT WILL

SECTION 2 - REGISTRA	ANT'S CLI	ENT INFOR	MATION
Complete this section to:			SELECT ONE:
1. Provide information for <u>each</u> new Client since your last report filed.		eport filed.	NEW CLIENT
-AND/OR- 2. Report any changes in information for <u>each</u> <i>existing</i> Client since your last report filed.		nt since your	IF NEW, DATE QUALIFIED: September 1, 2021
		it since your	EXISTING CLIENT
This page	may be duplicated	d for each Client.	NO NEW INFORMATION TO REPORT
CLIENT NAME			PHONE
Michael Baker International			(949) 472-3473
ADDRESS			DESCRIBE NATURE OF CLIENT'S BUSINESS
5 Hutton Centre Drive, Suite 500			
CITY	STATE	ZIP	
Santa Ana	California	92707	
NAME OF PERSON, OTHER THAN CLIENT,	ON WHOSE BEHA	LF REGISTRANT HAS	S BEEN ENGAGED BY CLIENT TO LOBBY
NAME OF LOBBYING FIRM FOR WHICH RE			
BRIEF DESCRIPTION OF ALL MUNICIPAL C FORSEEABLY LOBBY FOR ON BEHALF OF		ined by Irvine Muni	icipal Code Section 1-7-102) REGISTRANT WILL
Environmental analyses/Transportation impr	rovements		

SECTION 3 - LOBBYING ACTIVITIES

NAME OF CLIENT ON WHOSE BEHALF LOBBYING WAS CONDUCTED.

Lobbying activities must be reported for <u>each</u> Client for which compensation of \$10,000 or more was received during the calendar quarter in question.

Identify the Client represented. List all issues, including municipal questions, upon which lobbying activities were engaged, including, a list of specific legislative proposals and other proposed, pending or completed official actions that occurred during this reporting period.

This page may be duplicated as needed.

Michael Baker Internation	nal			
NO REPORTABLE ACTIVITIY FOR THIS REPORTING PERIOD.				
NAME OF EMPLOYEE/A	GENT WHO ACTED AS LOBBYIST			
Peter Whittingham				
DESCRIPTION OF ISSUE	/MUNICIPAL QUESTION			
Future infrastructure imp	rovements in the city			
DATE OF CONTACT	CITY OFFICIAL CONTACTED	TITLE OF CITY OFFICIAL CONTACTED		
09/10/2021	Anthony Kuo	Council member		
OUTCOME OF CONTAC	T			
None				
NAME OF CLIENT ON W	HOSE BEHALF LOBBYING WAS CONDUCTE	D		
Crown Castle				
NO REPORTABLE AC	CTIVITIY FOR THIS REPORTING PERIOD.			
NAME OF EMPLOYEE/AGENT WHO ACTED AS LOBBYIST				
DESCRIPTION OF ISSUE,	/MUNICIPAL QUESTION			
DATE OF CONTACT	CITY OFFICIAL CONTACTED	TITLE OF CITY OFFICIAL CONTACTED		
OUTCOME OF CONTAC	T			

SECTION 4 - VERIFICATION OF REGISTRANT

I HAVE USED ALL REASONABLE DILIGENCE IN PREPARING THIS REPORT AND EACH OF THE SECTIONS HEREOF, AND I HAVE PERSONAL KNOWLEDGE OF THE MATTERS CONTAINED IN THIS REPORT.

I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FOREGOING IS TRUE AND CORRECT.

REGISTRANT LOBBYIST SIGNATURE

10/06/2021

DATE

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TERMINATION OF:

☐ Registrant Lobbyist ☐ Client
INSTRUCTIONS: Complete and return to: City of Irvine - Office of the City Clerk One Civic Center Plaza Irvine, CA 92623-9575
Please note: The filing of this Notice of Termination does not relieve the registrant of reporting requirements imposed for the reporting period in question.
PART I TERMINATING REGISTRANT LOBBYIST / CLIENT INFORMATION
Name of Registrant Lobbyist: WHITTINGHAM PETER 6. If individual, include first, last and middle initial
Name of Terminating Client (If Applicable):
Business Address: 130 THEORY SUITE 100, IRVINE CA 92617
Business E-mail Address: 6RACSSA@CISCOOM
Business Phone Number: (949)823-6400
Termination date: 8-12-2021
PART II VERIFICATION OF REGISTRANT
I have used all reasonable diligence in preparing this report and I have personal knowledge of the matters contained in this report. I certify under penalty of perjury under the laws of the State of California that the forgoing is true and correct
Date Signature of Registrant Lobbyist
Name of Lobbying Firm