

CITY OF DETROIT LOBBYIST REGISTRATION

(PLEASE READ BOTH FRONT AND BACK COMPLETING THIS FORM)

OFFICE OF THE
DETROIT CITY CLERK

2019 AUG 28 A 11:08

1. REGISTRANT'S NAME (Only one person may register with this form) <p style="font-size: 1.2em; text-align: center;">JULIE RWAN</p>	2. REGISTRANT'S ID NUMBER <p style="font-size: 1.2em; text-align: center;">2019-8</p>
3. BUSINESS ADDRESS (All mail will be sent to this address) 100 Broadway, New York, NY, 10005, 4th Floor	4. TELEPHONE NUMBER(S) <p style="font-size: 1.2em;">646 595-1110</p>
5. TYPE OF LOBBYIST (Check all applicable boxes.) <ul style="list-style-type: none"> <input type="checkbox"/> Registered lobbyist under Federal Law <input checked="" type="checkbox"/> Registered lobbyist under Michigan Law <input type="checkbox"/> Registered lobbyist in other states (name state(s)): <input type="checkbox"/> A person anticipating expenditures of more than \$1,000 over the next twelve (12) months for lobbying all public officials <input checked="" type="checkbox"/> A person anticipating expenditures of more than \$250.00 over the next twelve (12) months for lobbying a single public official (See definition of "lobbyist" on reverse) 	
6. NAME AND ADDRESS OF CLIENT(S) <p style="font-size: 1.2em; text-align: center;">Vital Strategies 100 Broadway 4th Floor New York, NY 10005</p>	
7. VERIFICATION I swear, or affirm, that: a) During one (1) year preceding this registration, I have not held the position of Mayor, member of the City Council, City Clerk, appointive officer, or any member of a board, commission or other voting body that is established by either branch of City government or by the 2012 Detroit City Charter or under the 1984 Detroit City Code, or been a City appointee or City employee, or an individual who provided services to the City pursuant to a personal services contract; and b) All reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge.	
<p style="font-size: 1.5em; text-align: center;">JULIE RWAN</p> _____ Type or print name of registrant	
<p style="font-size: 1.5em; text-align: center;">[Signature]</p> _____ Signature	
Subscribed and sworn to me this sworn to before me this <u>24th</u> day of <u>July</u> , 2019	
Notary Public, Wayne County, Michigan My Commission Expires: _____	ANDREW RENDEIRO Notary Public, State of New York No. 02RE5012955 Qualified in Kings County Commission Expires June 15, 2023

FOR OFFICIAL USE ONLY		
DATE OF ANNUAL REGISTRATION From <u>8-28-2019</u>	THIS REGISTRATION IS VALID From <u>8-28-2019</u>	Amount of fee paid <u>1125.00</u> Date of payment <u>8-28-2019</u>

CITY OF DETROIT QUARTERLY REPORT

TO BE FILED BY REGISTERED LOBBYISTS FOR EACH CLIENT
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)

OFFICE OF THE
CITY CLERK

2019 DEC 11 A 10:42

1. LOBBYIST'S NAME <div style="text-align: right; font-size: 1.2em;">Julie Rwan</div>	2. LOBBYIST'S ID NUMBER <div style="text-align: right;">2019-8</div>
3. BUSINESS ADDRESS (All mail will be sent to this address) 100 Broadway, 4 th Floor, New York, NY 10005 <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX	4. TELEPHONE NUMBER(S) 212, 500 5720 () _____ <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX

5. DATE OF ANNUAL REGISTRATION August 28 2019 <small>Month Day Year</small> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)	6. PERIOD FOR THIS REPORT <input checked="" type="checkbox"/> 1 st Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2 nd Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3 rd Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4 th Quarter (ending 12 months after annual registration)
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7. NAME OF CLIENT Vital Strategies

8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER

I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER.
(Provide a brief description and, if necessary, attach additional sheets.)
 On behalf of Vital Strategies, I engaged in discussions with officials from the Detroit Health Department and the Detroit Police Department about health and harm reduction objectives, including data coordination, syringe access, and reduced incarceration, and the potential for grant funding from Vital Strategies to support.

I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.

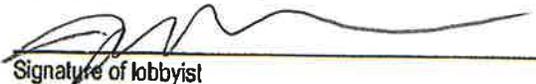
9. EXPENDITURES BY CATEGORY	THIS REPORTING QUARTER	REGISTRATION DATE THROUGH END OF THIS QUARTER
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS	9a. \$ 0	9a. \$ 0
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....	9b. \$ 0	9b. \$ 0
9c. ALL OTHER LOBBYING EXPENDITURES	9c. \$ 0	9c. \$ 0
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ 0	9d. \$ 0

10. VERIFICATION

I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge.

Julie Rwan

 Type or print name of lobbyist

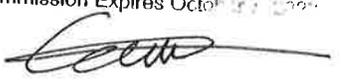


 Signature of lobbyist

Subscribed and sworn to me this sworn to before me
 this 26 day of November, 2019

Notary Public, Wayne County, Michigan
 My Commission Expires: _____

CAMILA RODRIGUEZ
 Notary Public, State of New York
 Reg. No. 02RO639893G
 Qualified In New York County
 Commission Expires October 31, 2021



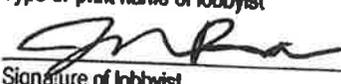
FOR OFFICIAL USE ONLY

Amount of fee paid: 11.00 Date of payment: 11/14/2019

CITY OF DETROIT QUARTERLY REPORT

TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)

OFFICE OF THE
DETROIT CITY CLERK
2020 JUL 13 P 4: 05

1. LOBBYIST'S NAME Julie Rwan		2. LOBBYIST'S ID NUMBER 2019-8																
3. BUSINESS ADDRESS (All mail will be sent to this address) 100 Broadway 4th Floor, New York, NY 10005 <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		4. TELEPHONE NUMBER(S) (212) 500-5720 <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX																
5. DATE OF ANNUAL REGISTRATION <div style="display: flex; justify-content: space-around; align-items: center;"> <u>August</u> Month <u>28</u> Day <u>2019</u> Year </div> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		6. PERIOD FOR THIS REPORT <input type="checkbox"/> 1 st Quarter (ending 3 months after annual registration) <input checked="" type="checkbox"/> 2 nd Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3 rd Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4 th Quarter (ending 12 months after annual registration)																
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9. EXPENDITURES BY CATEGORY		<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;"></th> <th style="width: 25%;">THIS REPORTING QUARTER</th> <th style="width: 25%;">REGISTRATION DATE THROUGH END OF THIS QUARTER</th> </tr> </thead> <tbody> <tr> <td style="padding: 2px;">9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS</td> <td style="padding: 2px;">9a. \$ <u>0</u></td> <td style="padding: 2px;">9a. \$ <u>0</u></td> </tr> <tr> <td style="padding: 2px;">9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING</td> <td style="padding: 2px;">9b. \$ <u>0</u></td> <td style="padding: 2px;">9b. \$ <u>0</u></td> </tr> <tr> <td style="padding: 2px;">9c. ALL OTHER LOBBYING EXPENDITURES</td> <td style="padding: 2px;">9c. \$ <u>0</u></td> <td style="padding: 2px;">9c. \$ <u>0</u></td> </tr> <tr> <td style="padding: 2px;">9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c)</td> <td style="padding: 2px;">9d. \$ <u>0</u></td> <td style="padding: 2px;">9d. \$ <u>0</u></td> </tr> </tbody> </table>			THIS REPORTING QUARTER	REGISTRATION DATE THROUGH END OF THIS QUARTER	9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS	9a. \$ <u>0</u>	9a. \$ <u>0</u>	9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING	9b. \$ <u>0</u>	9b. \$ <u>0</u>	9c. ALL OTHER LOBBYING EXPENDITURES	9c. \$ <u>0</u>	9c. \$ <u>0</u>	9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c)	9d. \$ <u>0</u>	9d. \$ <u>0</u>
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9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c)	9d. \$ <u>0</u>	9d. \$ <u>0</u>																
10. VERIFICATION I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge. Julie Rwan Type or print name of lobbyist  Signature of lobbyist Subscribed and sworn to me this sworn to before me this <u>5th</u> day of <u>June</u> , <u>2020</u>  Notary Public, Wayne County, Michigan <u>New York County, NY</u> My Commission Expires: <u>October 7, 2023</u>																		

2
CAMILA RODRIGUEZ
 Notary Public, State of New York
 Reg. No. 02RO6398936
 Qualified in New York County
 Commission Expires October 7, 2023

FOR OFFICIAL USE ONLY

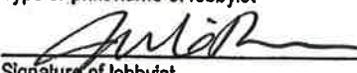
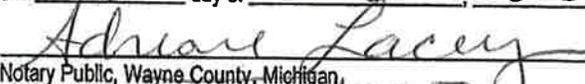
Amount of fee paid: 1.25
 Date of payment: 07-13-2020

CITY OF DETROIT QUARTERLY REPORT

OFFICE OF THE
DETROIT CITY CLERK

TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)

2023 MAR 14 A 9:35

1. LOBBYIST'S NAME Julie Rwan		2. LOBBYIST'S ID NUMBER 2019-8	
3. BUSINESS ADDRESS (All mail will be sent to this address) 100 Broadway, 4th Floor, New York, NY 10005 <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		4. TELEPHONE NUMBER(S) () 2125005720 () _____ <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION August 28 2019 <small>Month Day Year</small> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		6. PERIOD FOR THIS REPORT <input type="checkbox"/> 1 st Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2 nd Quarter (ending 6 months after annual registration) <input checked="" type="checkbox"/> 3 rd Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4 th Quarter (ending 12 months after annual registration)	
7. NAME OF CLIENT Vital Strategies			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER <input type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.) <input checked="" type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.			
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9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS		9a. \$ 0	9a. \$ 0
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9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ 0	9d. \$ 0
10. VERIFICATION I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge. Julie Rwan Type or print name of lobbyist  Signature of lobbyist Subscribed and sworn to me this sworn to before me this 27 day of Feb 2023  Notary Public, Wayne County, Michigan My Commission Expires: 5/11/2025			
<div style="border: 2px solid black; padding: 5px; text-align: center;"> ADRIANE LACEY Notary Public - State of New York NO. 01LA6197607 Qualified in Kings County My Commission Expires 5/11/2025 </div>			
FOR OFFICIAL USE ONLY Amount of fee paid: \$ 25.00 Date of payment: 3/14/23 KK			

CITY OF DETROIT QUARTERLY REPORT

TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT
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OFFICE OF THE
DETROIT CITY CLERK

2023 MAR 14 A 9:35

1. LOBBYIST'S NAME Julie Rwan	2. LOBBYIST'S ID NUMBER 2019-8
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5. DATE OF ANNUAL REGISTRATION <table style="width: 100%; border: none;"> <tr> <td style="text-align: center; width: 33%;">August</td> <td style="text-align: center; width: 33%;">28</td> <td style="text-align: center; width: 33%;">2019</td> </tr> <tr> <td style="text-align: center; font-size: small;">Month</td> <td style="text-align: center; font-size: small;">Day</td> <td style="text-align: center; font-size: small;">Year</td> </tr> </table> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)	August	28	2019	Month	Day	Year	6. PERIOD FOR THIS REPORT <input type="checkbox"/> 1 st Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2 nd Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3 rd Quarter (ending 9 months after annual registration) <input checked="" type="checkbox"/> 4 th Quarter (ending 12 months after annual registration)
August	28	2019					
Month	Day	Year					

7. NAME OF CLIENT
Vital Strategies

8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER

I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER.
(Provide a brief description and, if necessary, attach additional sheets.)

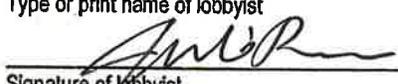
I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.

9. EXPENDITURES BY CATEGORY	THIS REPORTING QUARTER	REGISTRATION DATE THROUGH END OF THIS QUARTER
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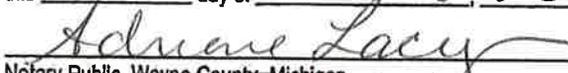
10. VERIFICATION

I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge.

Julie Rwan
Type or print name of lobbyist


Signature of lobbyist

Subscribed and sworn to me this sworn to before me
this 27 day of Feb. 2023


Notary Public, Wayne County, Michigan
My Commission Expires: 5/11/2025

ADRIANE LACEY
 Notary Public - State of New York
 NO. 01LA6197607
 Qualified in Kings County
 My Commission Expires 5/11/2025

FOR OFFICIAL USE ONLY	Amount of fee paid: <u>\$25.00</u> Date of payment: <u>3/14/23</u>
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RW

**CITY OF DETROIT
LOBBYIST REGISTRATION**
(PLEASE READ BOTH FRONT AND BACK COMPLETING THIS FORM)

OFFICE OF THE
DETROIT CITY CLERK
2023 MAR 14 A 9:35

1. REGISTRANT'S NAME (Only one person may register with this form) Julie Rwan		2. REGISTRANT'S ID NUMBER 2019-8
3. BUSINESS ADDRESS (All mail will be sent to this address) 100 Broadway, New York, NY, 10005, 4th floor		4. TELEPHONE NUMBER(S) () <u>2125005720</u> () _____
5. TYPE OF LOBBYIST (Check all applicable boxes.)		
<input type="checkbox"/> Registered lobbyist under Federal Law <input checked="" type="checkbox"/> Registered lobbyist under Michigan Law <input type="checkbox"/> Registered lobbyist in other states (name state(s)): _____ <input type="checkbox"/> A person anticipating expenditures of more than \$1,000 over the next twelve (12) months for lobbying all public officials <input type="checkbox"/> A person anticipating expenditures of more than \$250.00 over the next twelve (12) months for lobbying a single public official (See definition of "lobbyist" on reverse)		
6. NAME AND ADDRESS OF CLIENT(S) Vital Strategies 100 Broadway, 4th Floor New York, NY, 10005		
7. VERIFICATION		
I swear, or affirm, that:		
a) During one (1) year preceding this registration, I have not held the position of Mayor, member of the City Council, City Clerk, appointive officer, or any member of a board, commission or other voting body that is established by either branch of City government or by the 2012 Detroit City Charter or under the 1984 Detroit City Code, or been a City appointee or City employee, or an individual who provided services to the City pursuant to a personal services contract; and		
b) All reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge.		
<u>Julie Rwan</u>		
Type or print name of registrant		
<u>[Signature]</u>		<div style="border: 2px solid black; padding: 5px; text-align: center;"> ADRIANE LACEY Notary Public - State of New York NO. 01LA6197607 Qualified in Kings County My Commission Expires <u>5/11/2025</u> </div>
Signature		
Subscribed and sworn to me this sworn to before me		
this <u>27</u> day of <u>Feb. 2023</u>		
<u>Adriane Lacey</u>		
Notary Public, Wayne County, Michigan		
My Commission Expires: <u>5/11/2025</u>		
FOR OFFICIAL USE ONLY:		
DATE OF ANNUAL REGISTRATION	THIS REGISTRATION IS VALID:	Amount of fee paid: <u>\$125.00</u>
<u>8</u> <u>28</u> <u>2020</u>	From <u>8</u> <u>28</u> <u>2020</u>	Date of payment: <u>3/14/23</u>
Month Day Year	Month Day Year	
	To <u>8</u> <u>28</u> <u>2021</u>	
	Month Day Year	

KK

CITY OF DETROIT QUARTERLY REPORT

OFFICE OF THE
DETROIT CITY CLERK

TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)

2023 MAR 14 A 9:35

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5. DATE OF ANNUAL REGISTRATION August 28 2020 <small>Month Day Year</small> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)	6. PERIOD FOR THIS REPORT <input checked="" type="checkbox"/> 1 st Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2 nd Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3 rd Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4 th Quarter (ending 12 months after annual registration)
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7. NAME OF CLIENT
Vital Strategies

8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER

I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER.
(Provide a brief description and, if necessary, attach additional sheets.)

I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.

9. EXPENDITURES BY CATEGORY	THIS REPORTING QUARTER	REGISTRATION DATE THROUGH END OF THIS QUARTER
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Julie Rwan
Type or print name of lobbyist

Julie Rwan
Signature of lobbyist

Subscribed and sworn to me this sworn to before me
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Adriane Lacey
Notary Public, Wayne County, Michigan
My Commission Expires: 5/11/2025

ADRIANE LACEY
 Notary Public - State of New York
 NO. 01LA6197607
 Qualified in Kings County
 My Commission Expires 5/11/2025

FOR OFFICIAL USE ONLY

Amount of fee paid: \$25.00 Date of payment: 3/14/23

KW

CITY OF DETROIT QUARTERLY REPORT

OFFICE OF THE
DETROIT CITY CLERK

TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)

2023 MAR 14 A 9:36

1. LOBBYIST'S NAME Julie Rwan	2. LOBBYIST'S ID NUMBER 2019-8
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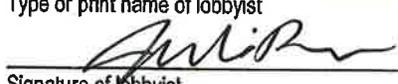
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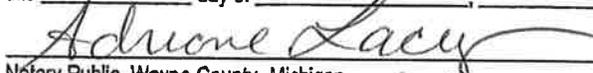
10. VERIFICATION

I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge.

Julie Rwan
Type or print name of lobbyist


Signature of lobbyist

Subscribed and sworn to me this sworn to before me
this 27 day of Feb, 2023


Notary Public, Wayne County, Michigan
My Commission Expires: 5/11/2025

ADRIANE LACEY
 Notary Public - State of New York
 NO. 01LA6197607
 Qualified in Kings County
 My Commission Expires 5/11/2025

FOR OFFICIAL USE ONLY

Amount of fee paid: \$25.00 Date of payment: 3/14/23

KW

CITY OF DETROIT QUARTERLY REPORT

OFFICE OF THE
DETROIT CITY CLERK

TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)

2023 MAR 14 A 9:36

1. LOBBYIST'S NAME Julie Rwan	2. LOBBYIST'S ID NUMBER 2019-8
3. BUSINESS ADDRESS (All mail will be sent to this address) 100 Broadway, 4th Floor, New York, NY 10005 <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX	4. TELEPHONE NUMBER(S) () 2125005720 () _____ <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX

5. DATE OF ANNUAL REGISTRATION August 28 2020 _____ Month Day Year (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)	6. PERIOD FOR THIS REPORT <input type="checkbox"/> 1 st Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2 nd Quarter (ending 6 months after annual registration) <input checked="" type="checkbox"/> 3 rd Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4 th Quarter (ending 12 months after annual registration)
---	--

7. NAME OF CLIENT
Vital Strategies

8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER

I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER.
(Provide a brief description and, if necessary, attach additional sheets.)

I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.

9. EXPENDITURES BY CATEGORY	THIS REPORTING QUARTER	REGISTRATION DATE THROUGH END OF THIS QUARTER
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS	9a. \$ 0	9a. \$ 0
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....	9b. \$ 0	9b. \$ 0
9c. ALL OTHER LOBBYING EXPENDITURES	9c. \$ 0	9c. \$ 0
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ 0	9d. \$ 0

10. VERIFICATION

I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge.

Julie Rwan
Type or print name of lobbyist

Julie Rwan
Signature of lobbyist

Subscribed and sworn to me this sworn to before me
this 27 day of Feb 2023

Adriane Lacey
Notary Public, Wayne County, Michigan
My Commission Expires: 5/11/2025

ADRIANE LACEY
 Notary Public - State of New York
 NO. 01LA6197607
 Qualified in Kings County
 My Commission Expires 5/11/2025

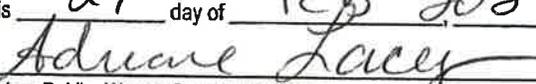
FOR OFFICIAL USE ONLY	Amount of fee paid: <u>\$25.00</u> Date of payment: <u>3/14/23</u> KS
-----------------------	--

CITY OF DETROIT QUARTERLY REPORT

TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)

OFFICE OF THE
DETROIT CITY CLERK

2023 MAR 14 A 9:36

1. LOBBYIST'S NAME Julie Rwan		2. LOBBYIST'S ID NUMBER 2019-8	
3. BUSINESS ADDRESS (All mail will be sent to this address) 100 Broadway, 4th Floor, New York, NY 10005 <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		4. TELEPHONE NUMBER(S) () 2125005720 () _____ <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION August 28 2020 <small>Month Day Year</small> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		6. PERIOD FOR THIS REPORT <input type="checkbox"/> 1 st Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2 nd Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3 rd Quarter (ending 9 months after annual registration) <input checked="" type="checkbox"/> 4 th Quarter (ending 12 months after annual registration)	
7. NAME OF CLIENT Vital Strategies			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER <input type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.) <input checked="" type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.			
9. EXPENDITURES BY CATEGORY		THIS REPORTING QUARTER	REGISTRATION DATE THROUGH END OF THIS QUARTER
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS		9a. \$ 0	9a. \$ 0
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ 0	9b. \$ 0
9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ 0	9c. \$ 0
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ 0	9d. \$ 0
10. VERIFICATION I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge. Julie Rwan Type or print name of lobbyist  Signature of lobbyist Subscribed and sworn to me this sworn to before me this <u>27</u> day of <u>Feb</u> <u>2023</u>  Notary Public, Wayne County, Michigan My Commission Expires: <u>5/11/2025</u>			
<div style="border: 2px dashed black; padding: 5px; display: inline-block;"> ADRIANE LACEY Notary Public - State of New York NO. 01LA6197607 Qualified in Kings County My Commission Expires <u>5/11/2025</u> </div>			
FOR OFFICIAL USE ONLY Amount of fee paid: <u>\$25.00</u> Date of payment: <u>3/14/23</u> <div style="text-align: center; color: red; font-weight: bold; font-size: 1.2em;">Kw</div>			

CITY OF DETROIT LOBBYIST REGISTRATION

(PLEASE READ BOTH FRONT AND BACK COMPLETING THIS FORM)

OFFICE OF THE
DETROIT CITY CLERK

2023 MAR 14 A 9:35

1. REGISTRANT'S NAME (Only one person may register with this form) Julie Rwan	2. REGISTRANT'S ID NUMBER 2019-8
--	---

3. BUSINESS ADDRESS (All mail will be sent to this address) 100 Broadway, New York, NY, 10005, 4th floor	4. TELEPHONE NUMBER(S) () <u>2125005720</u> () _____
--	--

5. TYPE OF LOBBYIST (Check all applicable boxes.)

Registered lobbyist under Federal Law
 Registered lobbyist under Michigan Law
 Registered lobbyist in other states (name state(s)): _____
 A person anticipating expenditures of more than \$1,000 over the next twelve (12) months for lobbying all public officials
 A person anticipating expenditures of more than \$250.00 over the next twelve (12) months for lobbying a single public official
(See definition of "lobbyist" on reverse)

6. NAME AND ADDRESS OF CLIENT(S)
 Vital Strategies
 100 Broadway, 4th Floor
 New York, NY, 10005

7. VERIFICATION

I swear, or affirm, that:

a) During one (1) year preceding this registration, I have not held the position of Mayor, member of the City Council, City Clerk, appointive officer, or any member of a board, commission or other voting body that is established by either branch of City government or by the 2012 Detroit City Charter or under the 1984 Detroit City Code, or been a City appointee or City employee, or an individual who provided services to the City pursuant to a personal services contract; and

b) All reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge.

Julie Rwan
 Type or print name of registrant

Julie Rwan
 Signature

Subscribed and sworn to me this sworn to before me
 this 27 day of Feb 2023

Adriane Lacey
 Notary Public, Wayne County, Michigan
 My Commission Expires: 5/11/2025

ADRIANE LACEY
 Notary Public - State of New York
 NO. 01LA6197607
 Qualified in Kings County
 My Commission Expires 5/11/2025

FOR OFFICIAL USE ONLY		
DATE OF ANNUAL REGISTRATION 8 28 2021 <small>Month Day Year</small>	THIS REGISTRATION IS VALID From 8 28 2021 <small>Month Day Year</small> To 8 28 2022 <small>Month Day Year</small>	Amount of fee paid \$125.00 Date of payment 3/14/23

CITY OF DETROIT QUARTERLY REPORT

TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)

OFFICE OF THE
DETROIT CITY CLERK

2023 MAR 14 A 9 36

1. LOBBYIST'S NAME Julie Rwan	2. LOBBYIST'S ID NUMBER 2019-8
3. BUSINESS ADDRESS (All mail will be sent to this address) 100 Broadway, 4th Floor, New York, NY 10005 <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX	4. TELEPHONE NUMBER(S) () 2125005720 () _____ <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX

5. DATE OF ANNUAL REGISTRATION August 28 2021 <small>Month Day Year</small> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)	6. PERIOD FOR THIS REPORT <input checked="" type="checkbox"/> 1 st Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2 nd Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3 rd Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4 th Quarter (ending 12 months after annual registration)
--	--

7. NAME OF CLIENT
Vital Strategies

8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER

I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER.
(Provide a brief description and, if necessary, attach additional sheets.)

I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.

9. EXPENDITURES BY CATEGORY	THIS REPORTING QUARTER	REGISTRATION DATE THROUGH END OF THIS QUARTER
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS	9a. \$ 0	9a. \$ 0
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....	9b. \$ 0	9b. \$ 0
9c. ALL OTHER LOBBYING EXPENDITURES	9c. \$ 0	9c. \$ 0
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ 0	9d. \$ 0

10. VERIFICATION

I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge.

Julie Rwan
Type or print name of lobbyist

Julie Rwan
Signature of lobbyist

Subscribed and sworn to me this sworn to before me

this 27 day of Feb 2023

Adrienne Lacey
Notary Public, Wayne County, Michigan
My Commission Expires: 5/11/2025

ADRIENNE LACEY
 Notary Public - State of New York
 NO. 01LA6197607
 Qualified in Kings County
 My Commission Expires 5/11/2025

FOR OFFICIAL USE ONLY

Amount of fee paid: \$29.00 Date of payment: 3/19/23

KW

CITY OF DETROIT QUARTERLY REPORT

TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)

OFFICE OF THE
DETROIT CITY CLERK
2023 MAR 14 A 9:36

1. LOBBYIST'S NAME Julie Rwan		2. LOBBYIST'S ID NUMBER 2019-8	
3. BUSINESS ADDRESS (All mail will be sent to this address) 100 Broadway, 4th Floor, New York, NY 10005 <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		4. TELEPHONE NUMBER(S) () 2125005720 () _____ <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION August 28 2021 <small>Month Day Year</small> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		6. PERIOD FOR THIS REPORT <input type="checkbox"/> 1st Quarter (ending 3 months after annual registration) <input checked="" type="checkbox"/> 2nd Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3rd Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4th Quarter (ending 12 months after annual registration)	
7. NAME OF CLIENT Vital Strategies			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER			
<input type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.)			
<input checked="" type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.			
9. EXPENDITURES BY CATEGORY	THIS REPORTING QUARTER	REGISTRATION DATE THROUGH END OF THIS QUARTER	
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS	9a. \$ 0	9a. \$ 0	
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....	9b. \$ 0	9b. \$ 0	
9c. ALL OTHER LOBBYING EXPENDITURES	9c. \$ 0	9c. \$ 0	
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ 0	9d. \$ 0	
10. VERIFICATION I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge. Julie Rwan Type or print name of lobbyist _____ Signature of lobbyist Subscribed and sworn to me this sworn to before me this <u>27</u> day of <u>Feb</u> 2023 _____ Notary Public, Wayne County, Michigan My Commission Expires: <u>5/11/2025</u>			
<div style="border: 2px dashed black; padding: 5px; display: inline-block;"> ADRIANE LACEY Notary Public - State of New York NO. 01LAG197607 Qualified in Kings County My Commission Expires <u>5/11/2025</u> </div>			
FOR OFFICIAL USE ONLY			
Amount of fee paid: <u>\$25.00</u>		Date of payment: <u>3/14/23</u>	

K

CITY OF DETROIT QUARTERLY REPORT

OFFICE OF THE
DETROIT CITY CLERK

TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)

2023 MAR 14 A 9:36

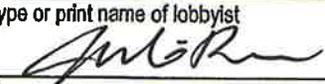
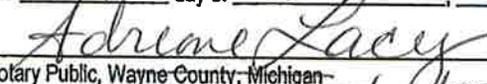
1. LOBBYIST'S NAME Julie Rwan		2. LOBBYIST'S ID NUMBER 2019-8	
3. BUSINESS ADDRESS (All mail will be sent to this address) 100 Broadway, 4th Floor, New York, NY 10005 <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		4. TELEPHONE NUMBER(S) () 2125005720 () _____ <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION August 28 2021 <small>Month Day Year</small> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		6. PERIOD FOR THIS REPORT <input type="checkbox"/> 1 st Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2 nd Quarter (ending 6 months after annual registration) <input checked="" type="checkbox"/> 3 rd Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4 th Quarter (ending 12 months after annual registration)	
7. NAME OF CLIENT Vital Strategies			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER <input type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.) <input checked="" type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.			
9. EXPENDITURES BY CATEGORY		THIS REPORTING QUARTER	REGISTRATION DATE THROUGH END OF THIS QUARTER
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS		9a. \$ 0	9a. \$ 0
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ 0	9b. \$ 0
9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ 0	9c. \$ 0
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ 0	9d. \$ 0
10. VERIFICATION I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge. Julie Rwan Type or print name of lobbyist _____ Signature of lobbyist Subscribed and sworn to me this sworn to before me this 27 day of Feb 2023 _____ Notary Public, Wayne County, Michigan My Commission Expires: 5/1/2025			
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> ADRIANE LACEY Notary Public - State of New York NO. 01LA6197607 Qualified in Kings County My Commission Expires 5/1/2025 </div>			
FOR OFFICIAL USE ONLY: Amount of fee paid \$ 25.00 Date of payment 3/14/23 <div style="text-align: center; color: red; font-weight: bold; font-size: 1.2em;">RW</div>			

CITY OF DETROIT QUARTERLY REPORT

OFFICE OF THE
DETROIT CITY CLERK

TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)

2023 MAR 14 A 9 36

1. LOBBYIST'S NAME Julie Rwan		2. LOBBYIST'S ID NUMBER 2019-8	
3. BUSINESS ADDRESS (All mail will be sent to this address) 100 Broadway, 4th Floor, New York, NY 10005 <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		4. TELEPHONE NUMBER(S) () 2125005720 () _____ <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION August 28 2021 <small>Month Day Year</small> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		6. PERIOD FOR THIS REPORT <input type="checkbox"/> 1 st Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2 nd Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3 rd Quarter (ending 9 months after annual registration) <input checked="" type="checkbox"/> 4 th Quarter (ending 12 months after annual registration)	
7. NAME OF CLIENT Vital Strategies			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER <input type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.) <input checked="" type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.			
9. EXPENDITURES BY CATEGORY		THIS REPORTING QUARTER	REGISTRATION DATE THROUGH END OF THIS QUARTER
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS		9a. \$ 0	9a. \$ 0
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ 0	9b. \$ 0
9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ 0	9c. \$ 0
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ 0	9d. \$ 0
10. VERIFICATION I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge. Julie Rwan Type or print name of lobbyist  Signature of lobbyist Subscribed and sworn to me this sworn to before me this 27 day of Feb 2023  Notary Public, Wayne County, Michigan My Commission Expires: 5/11/2025			
<div style="border: 2px dashed black; padding: 5px; display: inline-block;"> ADRIANE LACEY Notary Public - State of New York NO. 01LA6197607 Qualified in Kings County My Commission Expires 5/11/2025 </div>			
FOR OFFICIAL USE ONLY			
Amount of fee paid: \$ 25.00		Date of payment: 3/14/23	

RW

CITY OF DETROIT LOBBYIST REGISTRATION

OFFICE OF THE
DETROIT CITY CLERK

(PLEASE READ BOTH FRONT AND BACK COMPLETING THIS FORM) 2023 MAR 14 A 9:36

1. REGISTRANT'S NAME (Only one person may register with this form) Julie Rwan	2. REGISTRANT'S ID NUMBER 2019-8
---	--

3. BUSINESS ADDRESS (All mail will be sent to this address) 100 Broadway, New York, NY, 10005, 4th floor	4. TELEPHONE NUMBER(S) () 2125005720 ()
--	---

5. TYPE OF LOBBYIST
(Check all applicable boxes.)

- Registered lobbyist under Federal Law
- Registered lobbyist under Michigan Law
- Registered lobbyist in other states (name state(s)):
- A person anticipating expenditures of more than \$1,000 over the next twelve (12) months for lobbying all public officials
- A person anticipating expenditures of more than \$250.00 over the next twelve (12) months for lobbying a single public official
(See definition of "lobbyist" on reverse)

6. NAME AND ADDRESS OF CLIENT(S)
 Vital Strategies
 100 Broadway, 4th Floor
 New York, NY, 10005

7. VERIFICATION

I swear, or affirm, that:

a) During one (1) year preceding this registration, I have not held the position of Mayor, member of the City Council, City Clerk, appointive officer, or any member of a board, commission or other voting body that is established by either branch of City government or by the 2012 Detroit City Charter or under the 1984 Detroit City Code, or been a City appointee or City employee, or an individual who provided services to the City pursuant to a personal services contract; and

b) All reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge.

Julie Rwan
 Type or print name of registrant

Signature *Julie Rwan*

ADRIANE LACEY
 Notary Public - State of New York
 NO. 01LA6197607
 Qualified in Kings County
 My Commission Expires 5/11/2025

Subscribed and sworn to me this sworn to before me
 this 27 day of Feb 2023

Adriane Lacey
 Notary Public, Wayne County, Michigan
 My Commission Expires: 5/11/2025

FOR OFFICIAL USE ONLY:		
DATE OF ANNUAL REGISTRATION <u>8</u> <u>28</u> <u>2022</u> Month Day Year	THIS REGISTRATION IS VALID: From <u>8</u> <u>28</u> <u>2022</u> Month Day Year To <u>8</u> <u>28</u> <u>2023</u> Month Day Year	Amount of fee paid: <u>\$125.00</u> Date of payment: <u>3/14/23</u>

CITY OF DETROIT QUARTERLY REPORT

OFFICE OF THE
DETROIT CITY CLERK

TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)

2023 MAR 14 A 9 36

1. LOBBYIST'S NAME Julie Rwan	2. LOBBYIST'S ID NUMBER 2019-8
3. BUSINESS ADDRESS (All mail will be sent to this address) 100 Broadway, 4th Floor, New York, NY 10005 <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX	4. TELEPHONE NUMBER(S) () 2125005720 () _____ <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX

5. DATE OF ANNUAL REGISTRATION <table style="width: 100%; border: none;"> <tr> <td style="text-align: center; border-bottom: 1px solid black;">August</td> <td style="text-align: center; border-bottom: 1px solid black;">28</td> <td style="text-align: center; border-bottom: 1px solid black;">2022</td> </tr> <tr> <td style="text-align: center; font-size: small;">Month</td> <td style="text-align: center; font-size: small;">Day</td> <td style="text-align: center; font-size: small;">Year</td> </tr> </table> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)	August	28	2022	Month	Day	Year	6. PERIOD FOR THIS REPORT <input checked="" type="checkbox"/> 1 st Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2 nd Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3 rd Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4 th Quarter (ending 12 months after annual registration)
August	28	2022					
Month	Day	Year					

7. NAME OF CLIENT
Vital Strategies

8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER

I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER.
(Provide a brief description and, if necessary, attach additional sheets.)

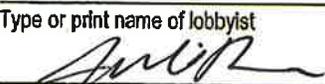
I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.

9. EXPENDITURES BY CATEGORY	THIS REPORTING QUARTER	REGISTRATION DATE THROUGH END OF THIS QUARTER
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS	9a. \$ 0	9a. \$ 0
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....	9b. \$ 0	9b. \$ 0
9c. ALL OTHER LOBBYING EXPENDITURES	9c. \$ 0	9c. \$ 0
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ 0	9d. \$ 0

10. VERIFICATION

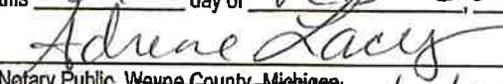
I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge.

Julie Rwan
Type or print name of lobbyist


Signature of lobbyist

Subscribed and sworn to me this sworn to before me

this 27 day of Feb 2023


Notary Public, Wayne County, Michigan
My Commission Expires: 5/11/2025

ADRIANE LACEY
 Notary Public - State of New York
 NO. 01LA6197607
 Qualified in Kings County
 My Commission Expires 5/11/2025

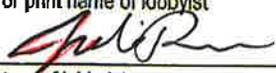
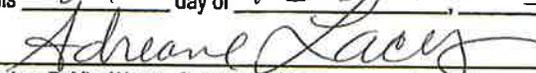
FOR OFFICIAL USE ONLY	Amount of fee paid: <u>\$25.00</u>	Date of payment: <u>3/14/23</u>
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CITY OF DETROIT QUARTERLY REPORT

TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT
(PLEASE READ BOTH FRONT AND BACK BEFORE COMPLETING THIS FORM)

OFFICE OF THE
DETROIT CITY CLERK
2019 MAR 14 A 9:35

1. LOBBYIST'S NAME Julie Rwan		2. LOBBYIST'S ID NUMBER 2019-8	
3. BUSINESS ADDRESS (All mail will be sent to this address) 100 Broadway, 4th Floor, New York, NY 10005 <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		4. TELEPHONE NUMBER(S) () 2125005720 () _____ <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION August 28 2022 <small>Month Day Year</small> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		6. PERIOD FOR THIS REPORT <input type="checkbox"/> 1st Quarter (ending 3 months after annual registration) <input checked="" type="checkbox"/> 2nd Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3rd Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4th Quarter (ending 12 months after annual registration)	
7. NAME OF CLIENT Vital Strategies			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER <input type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. <small>(Provide a brief description and, if necessary, attach additional sheets.)</small> <input checked="" type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.			
9. EXPENDITURES BY CATEGORY		THIS REPORTING QUARTER	REGISTRATION DATE THROUGH END OF THIS QUARTER
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS		9a. \$ 0	9a. \$ 0
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ 0	9b. \$ 0
9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ 0	9c. \$ 0
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ 0	9d. \$ 0
10. VERIFICATION I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge. Julie Rwan Type or print name of lobbyist  Signature of lobbyist Subscribed and sworn to me this sworn to before me this 27 day of Feb 2023  Notary Public, Wayne County, Michigan My Commission Expires: 5/11/2025			
<div style="border: 2px solid black; padding: 5px; display: inline-block;"> ADRIANE LACEY Notary Public - State of New York NO. 01LA6197607 Qualified in Kings County My Commission Expires 5/11/2025 </div>			
FOR OFFICIAL USE ONLY Amount of fee paid: \$25.00 Date of payment: 3/14/23 K			