

CITY OF DETROIT LOBBYIST REGISTRATION

(PLEASE READ BOTH FRONT AND BACK COMPLETING THIS FORM)

OFFICE OF THE
DETROIT CITY CLERK

2019 AUG 28
AM 08

1. REGISTRANT'S NAME (Only one person may register with this form) Kathryn Boulton	2. REGISTRANT'S ID NUMBER 2019-7
3. BUSINESS ADDRESS (All mail will be sent to this address) 100 Broadway, New York, NY 10005, 4th floor	4. TELEPHONE NUMBER(S) 734-262-6293

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)): Pennsylvania
- 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.

Kathryn Boulton

Type or print name of registrant

Kathryn Boulton

Signature

Subscribed and sworn to me this 24th day of July, 2019

[Signature]

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, ~~2019~~
2023

FOR OFFICIAL USE ONLY		
DATE OF ANNUAL REGISTRATION 8-28-2019 <small>Month Day Year</small>	THIS REGISTRATION IS VALID From 8-28-2019 to 8-28-2021 <small>Month Day Year</small>	Amount of fee paid \$ <u>125</u> Date of payment 8-28-2019

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

2019-7
[Handwritten initials]

1. LOBBYIST'S NAME <div style="text-align: center; font-size: 1.2em;">Kathryn Boulton</div>		2. LOBBYIST'S ID NUMBER <div style="text-align: center; font-size: 1.2em;">2019 DEC 11 A 10:41</div>	
3. BUSINESS ADDRESS (All mail will be sent to this address) <div style="text-align: center; font-size: 1.1em;">100 Broadway, 4th Floor, New York, NY 10005</div>		4. TELEPHONE NUMBER(S) <div style="text-align: center; font-size: 1.1em;">(212) 500 5720</div>	
<input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		<input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION <div style="display: flex; justify-content: space-around; font-size: 1.1em;"> August 28 2019 </div> <div style="display: flex; justify-content: space-around; font-size: 0.8em;"> Month Day Year </div> <p style="font-size: 0.8em;">(DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)</p>		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 <input checked="" type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.) <div style="font-size: 0.9em;"> 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. </div> <input 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. <div style="font-size: 1.1em; margin-left: 20px;">Kathryn Boulton</div> <hr style="border: 0; border-top: 1px solid black; margin-left: 20px;"/> Type or print name of lobbyist <div style="font-size: 1.1em; margin-left: 20px;"><i>Kathryn Boulton</i></div> <hr style="border: 0; border-top: 1px solid black; margin-left: 20px;"/> Signature of lobbyist Subscribed and sworn to me this sworn to before me this <u>26</u> day of <u>November</u> , <u>2019</u> <div style="font-size: 0.9em; margin-left: 20px;"> Notary Public, Wayne County, Michigan My Commission Expires: _____ </div> <div style="text-align: right; font-size: 0.8em; margin-top: 20px;"> CAMILA RODRIGUEZ Notary Public, State of New York Reg. No. 02RO6398936 Qualified in New York County Commission Expires October 7, 2023 <div style="font-size: 1.2em; margin-top: 5px;"><i>[Signature]</i></div> </div>			
FOR OFFICIAL USE ONLY <div style="display: flex; justify-content: space-between;"> Amount of fee paid: <u>4.25</u> Date of payment: <u>12/11/2019</u> </div>			

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 PM 4:05

1. LOBBYIST'S NAME Kathryn Boulton	2. LOBBYIST'S ID NUMBER 2019-7
3. BUSINESS ADDRESS (All mail will be sent to this address) 100 Broadway 4th Floor, New York, NY 10005	4. TELEPHONE NUMBER(S) (212) 500-5720
<input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX	<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 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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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.)

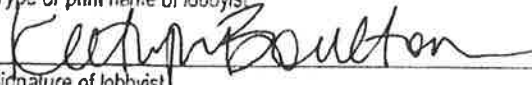
I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.

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.

Kathryn Boulton

Type or print name of lobbyist: _____

 Signature of lobbyist: _____

Subscribed and sworn to me this sworn to before me
 this 5th day of June, 2020


 Notary Public, Wayne County, Michigan New York County, NY
 My Commission Expires: October 7, 2023

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: \$ 25.00 Date of payment: 07.13.2020