CITY OF DETROIT

OFFICE OF THE DETROIT CITY CLERK

LOBBYIST REGISTRATION
(PLEASE READ BOTH FRONT AND BACK COMPLETING THIS FOR 2019 AUG 28 A 11: 08

, , , , , , , , , , , , , , , , , , , ,	ister with this form)	2. REGISTRANT'S ID NUMBER
Dahah Hel	ler	2019-11
 BUSINESS ADDRESS (All mail will be sent to this Broadway, New York, NY 10005 		4. TELEPHONE NUMBER(S)
(Check all applicable boxes.) Registered id Registered id A person and lobbying all i I A person and lobbying a si	oublic officials	e(s)):
6. NAME AND ADDRESS OF CLIENT(S)	Vital Str 100 Broadwa New York, 1	ategies 1 Lith Floor
7. VERIFICATION	New lost 1	10005
a) During one (1) year preceding this registration, appointive officer, or any member of a board, commor by the 2012 Detroit City Charter or under the 19 who provided services to the City pursuant to a persection b) All reasonable diligence was used in preparation of the City pursuant to a persection of th	ission or other voting body that it 84 Detroit City Code, or been a onal services contract; and of this form, and the contents are	s established by either branch of City government City appointee or City employée, or an individual
Signature		- = = 1
Subscribed and swom to me this swom to before me this	2019	ANDREW RENDEIRO Notary Public, State of New York No. 02RE5012955 Qualified in Kings County Commission Expires June 15, 2019

CITY OF DETROIT QUARTERLY REPORT

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

OFFICE OF THE DETROIT CITY CLERK

1.	LOBBYIST'S NAME	Daliah H	eller		2. LOBBYIS 201	T'S ID NUMBER DEC 11 A 10:	
3.	BUSINESS ADDRESS	INESS ADDRESS (All mail will be sent to this address)		4. TELEPHONE NUMBER(S)			
	100 Broadwa	ay, 4 th Floor, I	New York, NY 1	.0005	212 <u>,500</u>	5720 ()	
	IF THIS ADDRESS HAS (CHANGED, CHECK BOX			☐ IF A NUM	BER HAS CHANGED, CHECK BOX	
5.	DATE OF ANNUAL	REGISTRATION		6. PERIOD FO	R THIS REPOR	RT	
	August	28	2019	XI 1st Ouac	tor (anding 2	months after annual registration)	
	Month	Day	Year	2nd Quai	ter (ending 5	months after annual registration)	
	(DATE ENTERED BY ON REGISTR	CITY CLERK'S OFFI ATION FORM)	CE	∐ 3rd Quar	Quarter (ending 9 months after annual registration) Quarter (ending 12 months after annual registration)		
7.	NAME OF CLIENT	Vital Strate	gies				
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. 1	EXPENDITURES BY CA	TEGORY		THIS REPORTING	QUARTER	REGISTRATION DATE THROUGH	
	COMPLIMENTARY COPIES REPORTS, PAMPHLETS, C NFORMATIONAL MATERIA	ALENDARS, PERIODIC	ALS OR OTHER	9a. \$ _0		END OF THIS QUARTER 9a. \$ 0	
	PAYMENTS TO OTHER PE			9b. \$ 0		9b. \$ 0	
	ALL OTHER LOBBYING EX		1	9c. \$ 0	,	9c. \$ 0	
	TOTAL LOBBYING EXPEN			9d. \$ 0		9d. \$_O	
10.	VERIFICATION				minute of		
	I swear, or affirm, best of my knowledge Daliah Heller Type or print name of).	diligence was used in p	reparation of this form	n, and the con	itents are true and accurate to the	
	m	m		•			
	Signature of lobbyist			,			
	Subscribed and swom	to me this sworn to	before me			AMILA RODRIGUEZ	
1	this <u>26</u>	day of <u>Nove</u> n	1ben, 20	19	Re Quali	Public, State of New York g. No. 02RO6398936 fled In New York County Ion Expires October 7, 2023	
İ	Notary Public, Wayne My Commission Explre	County, Michigan es:			6	COO	
FOR	OFFICIAL USE ONLY	- Amount	of fee paid 4 X	,644 TOTAL	ate of payment	12///24/8	

CITY OF DETROIT

QUARTERLY REPORT
TO BE FILED BY REGISTERED LOBBYIST FOR EACH CLIENT
(PLEASE READ BOTH FRONT AND BACK REPORE COMPLETING THE FORM)

August 28 2019 Month Day Year (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM) 7. NAME OF CLIENT TEAL Strategies 6. PERIOD FOR THIS REPORT 1st Quarter (ending 3 months 2nd Quarter (ending 6 months 3nd Quarter (ending 9 months 4nd Quarter (ending 12 months 2nd Q	MBER(S) CHANGED, CHECK BOX after annual registration) after annual registration)
3. BUSINESS ADDRESS (All mail will be sent to this address) 100 Broady 4th Floor, New York, NY 10005 IF THIS ADDRESS HAS CHANGED, CHECK BOX 5. DATE OF ANNUAL REGISTRATION August 28 2019 Month Day Year (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM) 7. NAME OF CLIENT fital Strategies 8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER. ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.)	CHANGED, CHECK BOX after annual registration) after annual registration)
100 Broady 4th Floor, New York, NY 10005 Fithis address has changed, check box If a number has	CHANGED, CHECK BOX after annual registration) after annual registration)
5. DATE OF ANNUAL REGISTRATION August 28 2019 Month Day Year (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM) NAME OF CLIENT tall Strategies DESCRIPTION OF LOBBYING (Provide a brief description and, if necessary, attach ediditional sheets.)	after annual registration) after annual registration) after annual registration)
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I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.	
EXPENDITURES BY CATEGORY THIS REPORTING QUARTER REGIS	TRATION DATE THROUGH
COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS,	ND OF THIS QUARTER
INFORMATIONAL MATERIALS	
PAYMENTS TO OTHER PERSONS FOR LORBYING	
ALL OTHER LOBBYING EXPENDITURES	
TOTAL LORHVING EXPENDITIONS GOTAL OF A STATE	9d. \$ O
VERIFICATION	
I swear, or affirm, that all reasonable diligence was used in preparation of this form, and the contents are best of my knowledge.	lrue and accurate to the
Daliah Heller	
Type or print name of lobbyist	
Signature of lobbyist	
Subscribed and sworn to me this sworn to before me	
CAMILA Notary Public	RODRIGUEZ S, State of New York
otary Public, Wayne County Michigan Well May Ic all Qualified In	02RO6398936 New York County pires October 7, 2023
FFICIAL USE ONLY	
Amount of fee pald: 4 25 00 Date of payment: 0.7	- 13 - 20 20
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