

# CITY OF DETROIT LOBBYIST REGISTRATION

(PLEASE READ BOTH FRONT AND BACK COMPLETING THIS FORM)

<b>1. REGISTRANT'S NAME</b> (Only one person may register with this form) <span style="font-size: 1.2em; font-family: cursive;">Marcelus Brice</span>	<b>2. REGISTRANT'S ID NUMBER</b> <span style="font-size: 1.2em;">2017-1</span>
<b>3. BUSINESS ADDRESS</b> (All mail will be sent to this address) <span style="font-size: 1.2em;">601 Washington Blvd, Detroit, MI 48226</span>	<b>4. TELEPHONE NUMBER(S)</b> <span style="font-size: 1.2em;">(313) 478-6862</span>
<b>5. TYPE OF LOBBYIST</b> (Check all applicable boxes.) <ul style="list-style-type: none"> <li><input type="checkbox"/> Registered lobbyist under Federal Law</li> <li><input checked="" type="checkbox"/> Registered lobbyist under Michigan Law</li> <li><input type="checkbox"/> Registered lobbyist in other states (name state(s)):</li> <li><input type="checkbox"/> A person anticipating expenditures of more than \$1,000 over the next twelve (12) months for lobbying all public officials</li> <li><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)</li> </ul>	
<b>6. NAME AND ADDRESS OF CLIENT(S)</b> <del>Health Management Systems - 601 Washington Blvd, Detroit, MI 48226 MB</del> <del>Brooklyn Outdoor - 2501 Russell St, Ste 400, Detroit, MI 48207 MB</del> <del>Capitol Strategic Group, LLC - 601 Washington Blvd, Detroit, MI 48226</del>	
<b>7. VERIFICATION</b> <p>I swear, or affirm, that:</p> <p>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</p> <p>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> <p><span style="font-size: 1.5em; font-family: cursive;">Marcelus Brice</span>          Type or print name of registrant</p> <p><span style="font-size: 1.5em; font-family: cursive;">Marcelus Brice</span>          Signature</p> <p>Subscribed and sworn to me this <span style="font-size: 1.2em;">27th</span> day of <span style="font-size: 1.2em;">APRIL</span> 2017  <span style="font-size: 1.2em; font-family: cursive;">Yvette Palmer</span>          Notary Public, Wayne County, Michigan          My Commission Expires: <span style="font-size: 1.2em;">MAY 17, 2018</span></p>	
<b>FOR OFFICIAL USE ONLY</b>	
<b>DATE OF ANNUAL REGISTRATION</b> Month: _____ Day: _____ Year: _____	<b>THIS REGISTRATION IS VALID</b> From: _____ To: _____ Month: _____ Day: _____ Year: _____
Amount of fee paid: _____ Date of payment: _____	

CITY CLERK 27 P

# CITY OF DETROIT LOBBYIST REGISTRATION

(PLEASE READ BOTH FRONT AND BACK COMPLETING THIS FORM)

<b>1. REGISTRANT'S NAME</b> (Only one person may register with this form) <u>Marcelus Brice</u>	<b>2. REGISTRANT'S ID NUMBER</b> <u>2017-1a</u>
<b>3. BUSINESS ADDRESS</b> (All mail will be sent to this address) <u>Health Management Systems MB 601 Washington Blvd, Detroit, MI 48226</u>	<b>4. TELEPHONE NUMBER(S)</b> <u>(313) 776-6264</u>
<b>5. TYPE OF LOBBYIST</b> (Check all applicable boxes.) <ul style="list-style-type: none"> <li><input type="checkbox"/> Registered lobbyist under Federal Law</li> <li><input checked="" type="checkbox"/> Registered lobbyist under Michigan Law</li> <li><input type="checkbox"/> Registered lobbyist in other states (name state(s)):</li> <li><input type="checkbox"/> A person anticipating expenditures of more than \$1,000 over the next twelve (12) months for lobbying all public officials</li> <li><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)</li> </ul>	

**6. NAME AND ADDRESS OF CLIENT(S)**  
Health Management Systems  
601 Washington Blvd, Detroit MI 48226

**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.

Marcelus Brice  
Type or print name of registrant

Marcelus Brice  
Signature

Subscribed and sworn to me this sworn to before me

this 27th day of APRIL 2017

Yvette Palmer  
Notary Public, Wayne County, Michigan  
My Commission Expires: NOV. 17, 2018

YVETTE PALMER  
NOTARY PUBLIC STATE OF MICHIGAN  
WAYNE COUNTY  
ACTING IN: Wayne  
COMMISSION EXPIRES NOV. 17, 2018

FOR OFFICIAL USE ONLY:		
<b>DATE OF ANNUAL REGISTRATION</b> _____ <small>Month Day Year</small>	<b>THIS REGISTRATION IS VALID:</b> From _____ <small>Month Day Year</small> To _____ <small>Month Day Year</small>	<b>Amount of fee paid:</b> _____ <b>Date of payment:</b> _____

CITY CLERK 27

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

1. REGISTRANT'S NAME (Only one person may register with this form) <u>Marcelus Brice</u>	2. REGISTRANT'S ID NUMBER <u>2017-16</u>
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3. BUSINESS ADDRESS (All mail will be sent to this address) <u>601 Washington Blvd, Detroit, MI 48206</u>	4. TELEPHONE NUMBER(S) <u>(313) 778-6867</u>
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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)

Brooklyn Outdoor  
2501 Russell St, Ste 400, Detroit, MI 48207

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.

Marcelus Brice  
Type or print name of registrant

Marcelus Brice  
Signature

Subscribed and sworn to me this sworn to before me

this 27th day of April 2017

Notary Public, Wayne County, Michigan  
My Commission Expires: Nov. 17, 2018

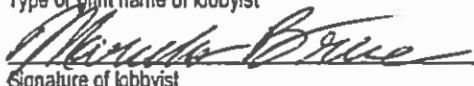
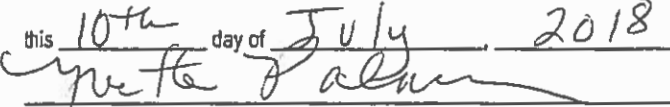
JEFFRE PALMER  
NOTARY PUBLIC-STATE OF MICHIGAN  
WAYNE COUNTY  
ACTING IN: Wayne  
MY COMMISSION EXPIRES NOV. 17, 2018

**FOR OFFICIAL USE ONLY:**

DATE OF ANNUAL REGISTRATION Month: _____ Day: _____ Year: _____	THIS REGISTRATION IS VALID From: Month _____ Day _____ Year _____ To: Month _____ Day _____ Year _____	Amount of fee paid: _____ Date of payment: _____
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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)

<b>1. LOBBYIST'S NAME</b> <i>Marcelus Brice</i>	<b>2. LOBBYIST'S ID NUMBER</b> <i>2017-1ABX</i>															
<b>3. BUSINESS ADDRESS</b> (All mail will be sent to this address) <i>7759 LA SALLE Blvd Detroit, MI 48206</i> <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX	<b>4. TELEPHONE NUMBER(S)</b> <i>(313) 776-6287</i> <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX															
<b>5. DATE OF ANNUAL REGISTRATION</b> <i>04 27 2017</i> <small>Month Day Year</small> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)	<b>6. PERIOD FOR THIS REPORT</b> <input type="checkbox"/> 1 <sup>st</sup> Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2 <sup>nd</sup> Quarter (ending 6 months after annual registration) <input checked="" type="checkbox"/> 3 <sup>rd</sup> Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4 <sup>th</sup> Quarter (ending 12 months after annual registration)															
<b>7. NAME OF CLIENT</b> <i>Brooklyn Outdoor</i>																
<b>8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER</b> <input checked="" type="checkbox"/> ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. <small>(Provide a brief description and, if necessary, attach additional sheets.)</small> <i>Worked with Administration to give input on sign ordinance</i> <input type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.																
<b>9. EXPENDITURES BY CATEGORY</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;"></th> <th style="width: 30%;">THIS REPORTING QUARTER</th> <th style="width: 30%;">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. \$ <i>0</i></td> <td style="padding: 2px;">9a. \$ _____</td> </tr> <tr> <td style="padding: 2px;">9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....</td> <td style="padding: 2px;">9b. \$ <i>0</i></td> <td style="padding: 2px;">9b. \$ _____</td> </tr> <tr> <td style="padding: 2px;">9c. ALL OTHER LOBBYING EXPENDITURES .....</td> <td style="padding: 2px;">9c. \$ <i>0</i></td> <td style="padding: 2px;">9c. \$ _____</td> </tr> <tr> <td style="padding: 2px;">9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, &amp; 9c).....</td> <td style="padding: 2px;">9d. \$ <i>0</i></td> <td style="padding: 2px;">9d. \$ _____</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. \$ <i>0</i>	9a. \$ _____	9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....	9b. \$ <i>0</i>	9b. \$ _____	9c. ALL OTHER LOBBYING EXPENDITURES .....	9c. \$ <i>0</i>	9c. \$ _____	9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ <i>0</i>	9d. \$ _____
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<b>10. VERIFICATION</b> 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. <i>Marcelus Brice</i> Type or print name of lobbyist  Signature of lobbyist Subscribed and sworn to me this sworn to before me this <i>10<sup>th</sup></i> day of <i>July</i> , <i>2018</i>  Notary Public, Wayne County, Michigan My Commission Expires: <i>Nov. 17, 2018</i>																
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; text-align: center;"> <b>YVETTE PALMER</b>                      NOTARY PUBLIC STATE OF MICHIGAN                      WAYNE COUNTY                      ACTING IN: <i>Wayne</i> </td> <td style="width: 50%; text-align: center;">                     MY COMMISSION EXPIRES NOV 17, 2018                 </td> </tr> </table>		<b>YVETTE PALMER</b> NOTARY PUBLIC STATE OF MICHIGAN WAYNE COUNTY ACTING IN: <i>Wayne</i>	MY COMMISSION EXPIRES NOV 17, 2018													
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<b>FOR OFFICIAL USE ONLY:</b> Amount of fee paid: _____ Date of payment: _____																

# CITY OF DETROIT QUARTERLY REPORT

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

1. LOBBYIST'S NAME <u>Marcelus Brice</u>		2. LOBBYIST'S ID NUMBER <u>2017-1ABX</u>	
3. BUSINESS ADDRESS (All mail will be sent to this address) <u>7759 LaSalle Blvd Detroit, MI 48206</u> <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		4. TELEPHONE NUMBER(S) <u>313 778 6267</u> <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX	
5. DATE OF ANNUAL REGISTRATION <u>4 27 2017</u> Month Day Year (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 type="checkbox"/> 2nd Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3rd Quarter (ending 9 months after annual registration) <input checked="" type="checkbox"/> 4th Quarter (ending 12 months after annual registration)	
7. NAME OF CLIENT <u>Brooklyn Outdoor</u>			
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER <input checked="" type="checkbox"/> ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.) <u>work with Administration on drafting sign ordinance</u> <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. \$ <u>0</u>	9a. \$ _____
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ <u>0</u>	9b. \$ _____
9c. ALL OTHER LOBBYING EXPENDITURES .....		9c. \$ <u>0</u>	9c. \$ _____
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ <u>0</u>	9d. \$ _____
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. <u>Marcelus Brice</u> Type or print name of lobbyist <u>Marcelus Brice</u> Signature of lobbyist Subscribed and sworn to me this sworn to before me this <u>10th</u> day of <u>July</u> , 2018 <u>Yvette Palmer</u> Notary Public, Wayne County, Michigan My Commission Expires: <u>NOV. 17, 2018</u>			
FOR OFFICIAL USE ONLY: Amount of fee paid: _____ Date of payment: _____			

YVETTE PALMER  
NOTARY PUBLIC STATE OF MICHIGAN  
WAYNE COUNTY  
ACTING IN: Wayne  
MY COMMISSION EXPIRES NOV. 17, 2018