
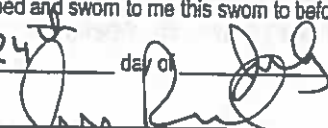


CITY OF DETROIT LOBBYIST REGISTRATION

(PLEASE READ BOTH FRONT AND BACK COMPLETING THIS FORM)

2019 AUG 28 A 11:08
 OFFICE OF THE
 DETROIT CITY CLERK

1. REGISTRANT'S NAME (Only one person may register with this form) ESTHER MAE ROSNER	2. REGISTRANT'S ID NUMBER 2019-9
3. BUSINESS ADDRESS (All mail will be sent to this address) 100 Broadway, New York, NY, 10005, 4th Floor	4. TELEPHONE NUMBER(S) (46) 595 1101
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) 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>ESTHER MAE ROSNER</u> Type or print name of registrant  Signature Subscribed and sworn to me this sworn to before me this <u>24</u> day of <u>July</u> , 2019  Notary Public, Wayne County, Michigan My Commission Expires: _____	

ANDREW RENDEK
 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 9-28-2019	THIS REGISTRATION IS VALID From 9-28-2019 Month Day Year To 9-28-2020 Month Day Year	AMOUNT OF FEE PAID \$1125.00 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)

FILED BY THE
DETROIT CITY CLERK

2019-DEC 11 A 10:42

1. LOBBYIST'S NAME Esther Mae Rosner	2. LOBBYIST'S ID NUMBER 2019-9
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.

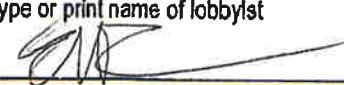
9. EXPENDITURES BY CATEGORY	THIS REPORTING QUARTER	REGISTRATION DATE THROUGH END OF THIS QUARTER
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS	9a. \$ 0	9a. \$ 0
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....	9b. \$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

Esther Mae Rosner

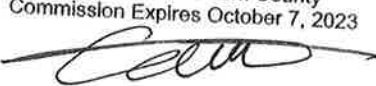
 Type or print name of lobbyist



 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. 02RO6398936
 Qualified in New York County
 Commission Expires October 7, 2023


FOR OFFICIAL USE ONLY


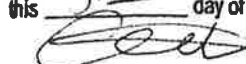
Amount of fee paid: \$ 25.00 Date of payment: 12/11/2019

CITY OF DETROIT QUARTERLY REPORT

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

2020 JUL 13 P 4: 05 I

OFFICE OF THE
DETROIT CITY CLERK

1. LOBBYIST'S NAME Esther Mae Rosner		2. LOBBYIST'S ID NUMBER 2019-9	
3. BUSINESS ADDRESS (All mail will be sent to this address) 100 Broady 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 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)	
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. Esther Mae Rosner Type or print name of lobbyist  Signature of lobbyist Subscribed and sworn to me this sworn to before me this 5 th day of June, 2020  Notary Public, Wayne County, Michigan 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			