

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

RECEIVED APR 29 2024

1. REGISTRANT'S NAME (Only one person may register with this form) Camille Boulais-Pretty	2. REGISTRANT'S ID NUMBER <b>2024-7</b>
3. BUSINESS ADDRESS (All mail will be sent to this address) c/o 2350 Kerner Boulevard, Suite 250, San Rafael, CA 94901	4. TELEPHONE NUMBER(S) ( 1 ) 438 ( ) 5092461

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)): MA, Boston, New Hampshire, and Vermont
- 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)  
Airbnb, Inc. 888 Brannan St. 4th Floor, San Francisco CA 94103

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.


Camille Boulais-Pretty  
Type or print name of registrant

*[Signature]* 2024 Feb 01  
Signature

Subscribed and sworn to me this sworn to before me  
this 1st day of February, 2024

MA LACHELLE ARANDA AREVALO  
Notary Public, Wayne County, Michigan USA Province of Ontario  
My Commission Expires: Unlimited duration

*[Signature]*  
MA LACHELLE ARANDA AREVALO  
Licensed Paralegal & Notary Public  
in and for the Province of Ontario.  
My commission is of unlimited duration.  
No legal advice given. LSO # P15293



Solemnly declared remotely by Camille Boulais-Pretty stated as being located in Montreal, Quebec before the undersigned Notary Public in Richmond Hill, Ontario on February 1, 2024 in accordance with O Reg 431/20, Administering Oath or Declaration Remotely.


**FOR OFFICIAL USE ONLY:**

DATE OF ANNUAL REGISTRATION <b>2 1 2024</b> Month Day Year	THIS REGISTRATION IS VALID: From <b>2 1 2024</b> Month Day Year To <b>2 1 2025</b> Month Day Year	Amount of fee paid: <b>\$125.00</b> Date of payment: <b>4/29/24</b>
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# CITY OF DETROIT QUARTERLY REPORT

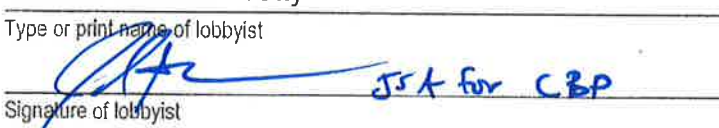
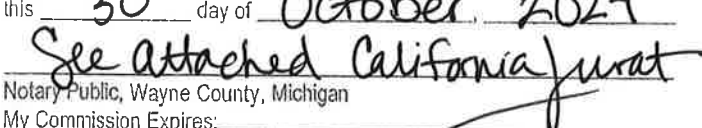
RECEIVED APR 29 2024

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> Camille Boulais-Pretty		<b>2. LOBBYIST'S ID NUMBER</b> <span style="color: red; font-size: 1.2em;">2024-7</span>									
<b>3. BUSINESS ADDRESS</b> (All mail will be sent to this address) c/o 2350 Kerner Boulevard, Suite 250, San Rafael, CA 94901 <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		<b>4. TELEPHONE NUMBER(S)</b> (438) 509-2461 ( ) _____ <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX									
<b>5. DATE OF ANNUAL REGISTRATION</b> <table style="width: 100%; text-align: center; border-collapse: collapse;"> <tr> <td style="border-bottom: 1px solid black; width: 25%;">02</td> <td style="border-bottom: 1px solid black; width: 25%;">1</td> <td style="border-bottom: 1px solid black; width: 25%;">2024</td> <td style="width: 25%;"></td> </tr> <tr> <td style="font-size: 0.8em;">Month</td> <td style="font-size: 0.8em;">Day</td> <td style="font-size: 0.8em;">Year</td> <td></td> </tr> </table> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		02	1	2024		Month	Day	Year		<b>6. PERIOD FOR THIS REPORT</b> <input checked="" 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 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)	
02	1	2024									
Month	Day	Year									
<b>7. NAME OF CLIENT</b> Airbnb, Inc.											
<b>8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER</b> <input checked="" type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. (Provide a brief description and, if necessary, attach additional sheets.) <p style="text-align: center; margin: 10px 0;">Discussions regarding Short-term rental regulations</p> <input type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.											
<b>9. EXPENDITURES BY CATEGORY</b>		<b>THIS REPORTING QUARTER</b>	<b>REGISTRATION DATE THROUGH END OF THIS QUARTER</b>								
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS .....		9a. \$ 0.00	9a. \$ 0.00								
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ 0.00	9b. \$ 0.00								
9c. ALL OTHER LOBBYING EXPENDITURES .....		9c. \$ 257.57	9c. \$ 257.57								
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ 257.57	9d. \$ 257.57								
<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. Camille Boulais-Pretty _____ Type or print name of lobbyist _____ Signature of lobbyist _____ Subscribed and sworn to me this sworn to before me this 25th day of April, 2024 _____ Notary Public, Wayne County, Michigan LA Province of Ontario My Commission Expires: Never											
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p style="font-size: 0.8em;">Solemnly declared remotely by Camille Boulais-Pretty stated as being located in Montréal, Quebec before the undersigned Notary Public in Richmond Hill, Ontario on April 25, 2024 in accordance with O Reg 431/20, Administering Oath or Declaration Remotely.</p> </div> <div style="width: 35%; text-align: center;">  </div> </div>											
<b>FOR OFFICIAL USE ONLY:</b>											
Amount of fee paid: <span style="color: red; font-size: 1.2em;">\$ 25.00</span>		Date of payment: <span style="color: red; font-size: 1.2em;">4/29/24</span>									

# 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> Camille Boulais-Pretty		<b>2. LOBBYIST'S ID NUMBER</b> 2024-7							
<b>3. BUSINESS ADDRESS</b> (All mail will be sent to this address) c/o 2350 Kerner Boulevard, Suite 250, San Rafael, CA <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		<b>4. TELEPHONE NUMBER(S)</b> (43) 509-2461 ( ) _____ <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX							
<b>5. DATE OF ANNUAL REGISTRATION</b> <table style="width: 100%; text-align: center;"> <tr> <td style="border-bottom: 1px solid black; width: 25%;">2</td> <td style="border-bottom: 1px solid black; width: 25%;">1</td> <td style="border-bottom: 1px solid black; width: 25%;">2024</td> </tr> <tr> <td>Month</td> <td>Day</td> <td>Year</td> </tr> </table> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		2	1	2024	Month	Day	Year	<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)	
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<b>9. EXPENDITURES BY CATEGORY</b>		<b>THIS REPORTING QUARTER</b>	<b>REGISTRATION DATE THROUGH END OF THIS QUARTER</b>						
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS .....		9a. \$ 0.00	9a. \$ 0.00						
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....		9b. \$ 0.00	9b. \$ 0.00						
9c. ALL OTHER LOBBYING EXPENDITURES .....		9c. \$ 0.00	9c. \$ 257.57						
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ 0.00	9d. \$ 257.57						
<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.  Camille Boulais-Pretty Type or print name of lobbyist   Signature of lobbyist  Subscribed and sworn to me this sworn to before me  this <u>30</u> day of <u>October</u> , 2024  Notary Public, Wayne County, Michigan My Commission Expires: _____									
<b>FOR OFFICIAL USE ONLY:</b>									
Amount of fee paid: <u>\$ 25.00</u> <span style="color: red; font-weight: bold; font-size: 1.2em;">KW</span>		Date of payment: <u>11/4/24</u>							

**CALIFORNIA JURAT WITH AFFIANT STATEMENT**

**GOVERNMENT CODE § 8202**

- See Attached Document (Notary to cross out lines 1-6 below)
- See Statement Below (Lines 1-6 to be completed only by document signer[s], not Notary)

*[Handwritten signature lines]*

Signature of Document Signer No. 1

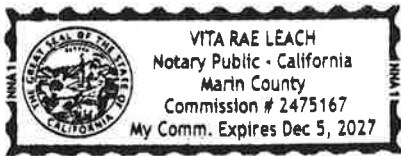
Signature of Document Signer No. 2 (if any)

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California  
 County of Marin

Subscribed and sworn to (or affirmed) before me  
 on this 30 day of October, 2024  
 by Joel Aurora  
Date Month Year

(1) Joel Aurora  
 (and (2) \_\_\_\_\_),  
Name(s) of Signer(s)



proved to me on the basis of satisfactory evidence  
 to be the person(s) who appeared before me.

Signature [Handwritten Signature]  
Signature of Notary Public

*Seal*  
 Place Notary Seal Above

**OPTIONAL**

*Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.*

**Description of Attached Document**

Title or Type of Document: \_\_\_\_\_ Document Date: \_\_\_\_\_

Number of Pages: \_\_\_\_\_ Signer(s) Other Than Named Above: \_\_\_\_\_