

RECEIVED AUG 01 2025

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) Reesa Kossoff	2. REGISTRANT'S ID NUMBER 2025-5
3. BUSINESS ADDRESS (All mail will be sent to this address) Service Employees International Union (SEIU) 1800 Massachusetts Ave., NW Washington, D.C. 20036	4. TELEPHONE NUMBER(S) (202) 617-4324
5. TYPE OF LOBBYIST (Check all applicable boxes.) <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <div style="width: 30%;"> <input type="checkbox"/> Registered lobbyist under Federal Law <input type="checkbox"/> Registered lobbyist under Michigan Law <input type="checkbox"/> Registered lobbyist in other states (name state(s)): <input checked="" 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) </div> <div style="width: 65%;"></div> </div>	
6. NAME AND ADDRESS OF CLIENT(S) Service Employees International Union (SEIU) 1800 Massachusetts Ave., NW Washington, D.C. 20036	
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. <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 60%;"> <p>Reesa Kossoff</p> <hr/> <p>Type or print name of registrant</p> <p><i>Reesa Kossoff</i></p> <hr/> <p>Signature</p> <p>Subscribed and sworn to me this sworn to before me</p> <p>this <u>30th</u> day of <u>July</u>, <u>2025</u></p> <p><i>[Signature]</i></p> <hr/> <p>Notary Public, Wayne County, Michigan <i>Phila. PA</i></p> <p>My Commission Expires: <u>July 9, 2027</u></p> </div> <div style="width: 35%; border: 1px solid black; padding: 5px; text-align: center;"> <p>Commonwealth of Pennsylvania - Notary Seal</p> <p>Melissa A. Anderson, Notary Public</p> <p>Philadelphia County</p> <p>My Commission Expires July 9, 2027</p> <p>Commission Number 1192390</p> </div> </div>	

FOR OFFICIAL USE ONLY:

DATE OF ANNUAL REGISTRATION <div style="display: flex; justify-content: space-around; font-size: 2em; font-weight: bold;"> 8 1 2025 </div> <div style="display: flex; justify-content: space-around; font-size: 0.8em;"> Month Day Year </div>	THIS REGISTRATION IS VALID: <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>From <u>8</u> <u>1</u> <u>2025</u></p> <div style="display: flex; justify-content: space-around; font-size: 0.8em;"> Month Day Year </div> </div> <div style="width: 45%;"> <p>To <u>8</u> <u>1</u> <u>2026</u></p> <div style="display: flex; justify-content: space-around; font-size: 0.8em;"> Month Day Year </div> </div> </div>	<div style="text-align: right;"> <p>Amount of fee paid \$ 125.00</p> <p>Date of payment: 8/1/25</p> </div>
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CITY OF DETROIT QUARTERLY REPORT

RECEIVED NOV 25 2025

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

1. LOBBYIST'S NAME <u>Reesa Kossoff</u>		2. LOBBYIST'S ID NUMBER <u>2025-5</u>	
3. BUSINESS ADDRESS (All mail will be sent to this address) <u>SEIU</u> <u>1800 Massachusetts Ave NW</u> <u>Washington DC 20036</u>		4. TELEPHONE NUMBER(S) <u>(202) 617-4341</u>	
<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 <u>08</u> <u>01</u> <u>2025</u> Month Day Year (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)	
7. NAME OF CLIENT <u>Service Employees International Union</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>Lobbied Area Industry Standards Board on worker priorities</u> <input type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.			
9. EXPENDITURES BY CATEGORY		THIS REPORTING QUARTER	
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS		9a. \$ <u>0</u>	
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING		9b. \$ <u>0</u>	
9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ <u>1295</u>	
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c)		9d. \$ <u>1295</u>	
9. EXPENDITURES BY CATEGORY		REGISTRATION DATE THROUGH END OF THIS QUARTER	
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS		9a. \$ _____	
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING		9b. \$ _____	
9c. ALL OTHER LOBBYING EXPENDITURES		9c. \$ _____	
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c)		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>Reesa Kossoff</u> Type or print name of lobbyist <u>Reesa Kossoff</u> Signature of lobbyist Subscribed and sworn to me this sworn to before me this <u>21st</u> day of <u>November</u> , <u>2025</u> <u>[Signature]</u> Notary Public, Wayne County, Michigan <u>DA</u> My Commission Expires: <u>July 9, 2027</u>			

Commonwealth of Pennsylvania - Notary Seal
 Melissa A. Anderson, Notary Public
 Philadelphia County
 My Commission Expires July 9, 2027
 Commission Number 1192390