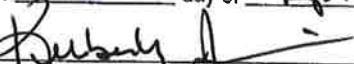


CITY OF DETROIT
LOBBYIST REGISTRATION
 (PLEASE READ BOTH FRONT AND BACK COMPLETING THIS FORM)

RECEIVED APR 03 2024

1. REGISTRANT'S NAME (Only one person may register with this form) James R. Ryan	2. REGISTRANT'S ID NUMBER 2024-6
3. BUSINESS ADDRESS (All mail will be sent to this address) Public Affairs Associates, LLC 120 N. Washington Square, Ste 1050 Lansing, MI 48933	4. TELEPHONE NUMBER(S) (517) 3713800
5. TYPE OF LOBBYIST (Check all applicable boxes.) <p style="margin-left: 20px;"> <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 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) </p>	
6. NAME AND ADDRESS OF CLIENT(S) Oakland County Board of Commissioners, 1200 N. Telegraph Rd. Pontiac, MI 48341 Wayne County Airport Authority, 11050 Rogell Dr. Bldg 602 Detroit, MI 48242	
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.	
James R. Ryan Type or print name of registrant  Signature	
Subscribed and sworn to me this sworn to before me this <u>1st</u> day of <u>April</u> , <u>2024</u>  Notary Public, Wayne County, Michigan My Commission Expires: <u>August 18th, 2029</u>	
 KIMBERLY JAMIESON My Commission Expires August 18, 2029 County of Ingham Acting In the County of <u>Wayne</u>	

FOR OFFICIAL USE ONLY:

DATE OF ANNUAL REGISTRATION 4 3 2024	THIS REGISTRATION IS VALID: 4 3 2024	Amount of fee paid \$125.00
Month 4	Month 4	Year 2024
Day 3	Day 3	Year 2024
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025
Year 2024	Month 3	Day 3
Month 3	Day 3	Year 2025
Day 3	Month 3	Year 2025

**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 JAMES R. RYAN		2. LOBBYIST'S ID NUMBER 2024-6
3. BUSINESS ADDRESS (All mail will be sent to this address) 123 W. ALLEGAN STE 800 LANSING, MI 48933		4. TELEPHONE NUMBER(S) (51) 3713800
<input checked="" type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		<input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX
5. DATE OF ANNUAL REGISTRATION <small>Month Day Year</small>	6. PERIOD FOR THIS REPORT 2024	
<small>(DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)</small> <ul style="list-style-type: none"> <input checked="" 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 type="checkbox"/> 4th Quarter (ending 12 months after annual registration) 		
7. NAME OF CLIENT OAKLAND COUNTY BOARD OF COMMISSIONERS & WAYNE COUNTY AIRPORT AUTHORITY		
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER	<input type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. <small>(Provide a brief description and, if necessary, attach additional sheets.)</small> <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. \$ <u>0</u>	9a. \$ <u>0</u>
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....	9b. \$ <u>0</u>	9b. \$ <u>0</u>
9c. ALL OTHER LOBBYING EXPENDITURES	9c. \$ <u>0</u>	9c. \$ <u>0</u>
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ <u>0</u>	9d. \$ <u>0</u>
10. VERIFICATION		
<p>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.</p> <p>JAMES R. RYAN</p> <p>Type or print name of lobbyist</p> <p><i>[Signature]</i></p> <p>Signature of lobbyist</p> <p>Subscribed and sworn to me this sworn to before me</p> <p>this <u>22nd</u> day of <u>January</u>, <u>2024</u></p> <p><i>[Signature]</i></p> <p>Notary Public, Wayne County, Michigan</p> <p>My Commission Expires: <u>August 18, 2029</u></p>		
FOR OFFICIAL USE ONLY:		<p>Amount of fee paid \$25.00</p> <p>Date of payment 1/23/24</p> <p><i>K.</i></p>

**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 JAMES R. RYAN		2. LOBBYIST'S ID NUMBER 2024-6
3. BUSINESS ADDRESS (All mail will be sent to this address) 123 W. ALLEGAN STE 800 LANSING, MI 48933		4. TELEPHONE NUMBER(S) (513) 3713800
<input checked="" type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		<input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX
5. DATE OF ANNUAL REGISTRATION Month Day Year (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)		6. PERIOD FOR THIS REPORT 2024 <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 OAKLAND COUNTY BOARD OF COMMISSIONERS & WAYNE COUNTY AIRPORT AUTHORITY		
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
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>0</u>
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....		9d. \$ <u>0</u>
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.		
JAMES R. RYAN		
Type or print name of lobbyist <i>James R. Ryan</i>		
Signature of lobbyist <i>James R. Ryan</i>		
Subscribed and sworn to me this sworn to before me this <u>22nd</u> day of <u>January</u> , <u>2026</u>		
Notary Public, Wayne County, Michigan My Commission Expires: <u>August 18, 2029</u>		 KIMBERLY JAMIESON My Commission Expires August 18, 2029 County of Ingham Acting in the County of <i>Wayne</i>
FOR OFFICIAL USE ONLY:		
Amount of fee paid \$ 25.00		Date of payment 1/23/26

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 JAMES R. RYAN		2. LOBBYIST'S ID NUMBER 2024-6
3. BUSINESS ADDRESS (All mail will be sent to this address) 123 W. ALLEGAN STE 800 LANSING, MI 48933		4. TELEPHONE NUMBER(S) (513) 3713800
<input checked="" type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		<input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX
5. DATE OF ANNUAL REGISTRATION <small>Month Day Year</small> <small>(DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)</small>	6. PERIOD FOR THIS REPORT 2025 <input type="checkbox"/> 1st Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2nd Quarter (ending 6 months after annual registration) <input checked="" type="checkbox"/> 3rd Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4th Quarter (ending 12 months after annual registration)	
7. NAME OF CLIENT OAKLAND COUNTY BOARD OF COMMISSIONERS & WAYNE COUNTY AIRPORT AUTHORITY		
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.		
JAMES R. RYAN		
Type or print name of lobbyist <i>JAMES R. RYAN</i>		
Signature of lobbyist <i>JAMES R. RYAN</i>		
Subscribed and sworn to me this sworn to before me this <u>22nd</u> day of <u>January</u> , <u>2026</u>		
Notary Public, Wayne County, Michigan My Commission Expires: <u>August 18, 2029</u>		
KIMBERLY JAMESON My Commission Expires August 18, 2029 County of Ingham Acting in the County <i>Johnson</i>		
FOR OFFICIAL USE ONLY Amount of fee paid: \$ 25.00 Date of payment: 1/23/26 <i>KC</i>		

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 JAMES R. RYAN		2. LOBBYIST'S ID NUMBER 2024-6
3. BUSINESS ADDRESS (All mail will be sent to this address) 123 W. ALLEGAN STE 800 LANSING, MI 48933		4. TELEPHONE NUMBER(S) (513) 3713800
<input checked="" type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		<input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX
5. DATE OF ANNUAL REGISTRATION <small>Month Day Year</small> <small>(DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)</small>	6. PERIOD FOR THIS REPORT 2025 <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 OAKLAND COUNTY BOARD OF COMMISSIONERS & WAYNE COUNTY AIRPORT AUTHORITY		
8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER	<input type="checkbox"/> I ENGAGED IN LOBBYING ACTIVITY DURING THIS QUARTER. <small>(Provide a brief description and, if necessary, attach additional sheets.)</small> <input checked="" type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.	
9. EXPENDITURES BY CATEGORY		
9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS	THIS REPORTING QUARTER 9a. \$ 0	REGISTRATION DATE THROUGH END OF THIS QUARTER 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		
<p>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.</p> <p>JAMES R. RYAN</p> <p>Type or print name of lobbyist <i>J. R. Ryan</i></p> <p>Signature of lobbyist <i>J. R. Ryan</i></p> <p>Subscribed and sworn to me this sworn to before me</p> <p>this <u>22nd</u> day of <u>January</u>, <u>2026</u></p> <p>Notary Public, Wayne County, Michigan My Commission Expires: <u>August 18, 2029</u></p>		
<div style="text-align: center;">  <p>KIMBERLY JAMISON My Commission Expires August 18, 2020 County of Ingleside Acting in the County of Wayne</p> </div>		
<p>FOR OFFICIAL USE ONLY:</p> <p>Amount of fee paid \$ 25.00</p> <p>Date of payment 1/23/26</p> <p style="text-align: center;"><i>KR</i></p>		

**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 JAMES R. RYAN		2. LOBBYIST'S ID NUMBER 2024-6
3. BUSINESS ADDRESS (All mail will be sent to this address) 123 W. ALLEGAN STE 800 LANSING, MI 48933		4. TELEPHONE NUMBER(S) 513-3713800
<input checked="" type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		<input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX
5. DATE OF ANNUAL REGISTRATION <small>Month Day Year</small> <small>(DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)</small>	6. PERIOD FOR THIS REPORT 2025 <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 OAKLAND COUNTY BOARD OF COMMISSIONERS & WAYNE COUNTY AIRPORT AUTHORITY		
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. \$ <u>0</u>	9a. \$ <u>0</u>
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....	9b. \$ <u>0</u>	9b. \$ <u>0</u>
9c. ALL OTHER LOBBYING EXPENDITURES	9c. \$ <u>0</u>	9c. \$ <u>0</u>
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ <u>0</u>	9d. \$ <u>0</u>
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.		
JAMES R. RYAN		
Type or print name of lobbyist <i>[Signature]</i>		
Signature of lobbyist <i>[Signature]</i>		
Subscribed and sworn to me this sworn to before me this <u>22nd</u> day of <u>January</u> , <u>2026</u>		
Notary Public, Wayne County, Michigan My Commission Expires: <u>August 18, 2029</u>		 KIMBERLY JAMIESON My Commission Expires August 18, 2029 County of Ingham Acting in the County of <i>[Signature]</i>
FOR OFFICIAL USE ONLY:		
Amount of fee paid: \$25.00		
Date of payment: 1/23/26		

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 JAMES R. RYAN		2. LOBBYIST'S ID NUMBER 2024-6
3. BUSINESS ADDRESS (All mail will be sent to this address) 123 W. ALLEGAN STE 800 LANSING, MI 48933		4. TELEPHONE NUMBER(S) (51) 3713800
<input checked="" type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		<input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX
5. DATE OF ANNUAL REGISTRATION <hr style="border: 0.5px solid black; margin: 5px 0;"/> (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)	6. PERIOD FOR THIS REPORT 2025 <input checked="" type="checkbox"/> 1st Quarter (ending 3 months after annual registration) <input checked="" type="checkbox"/> 2nd Quarter (ending 6 months after annual registration) <input type="checkbox"/> 3rd Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4th Quarter (ending 12 months after annual registration)	
7. NAME OF CLIENT OAKLAND COUNTY BOARD OF COMMISSIONERS & WAYNE COUNTY AIRPORT AUTHORITY		
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. \$ <u>0</u>	9a. \$ <u>0</u>
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....	9b. \$ <u>0</u>	9b. \$ <u>0</u>
9c. ALL OTHER LOBBYING EXPENDITURES	9c. \$ <u>0</u>	9c. \$ <u>0</u>
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ <u>0</u>	9d. \$ <u>0</u>
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.		
JAMES R. RYAN		
Type or print name of lobbyist <u>James R. Ryan</u>		
Signature of lobbyist <u>James R. Ryan</u>		
Subscribed and sworn to me this sworn to before me		
this <u>22</u> nd day of <u>January</u> , <u>2026</u>		
Notary Public, Wayne County, Michigan My Commission Expires: <u>August 18, 2029</u>		
FOR OFFICIAL USE ONLY: Amount of fee paid: <u>\$25.00</u> Date of payment: <u>1/23/26</u> <u>KC</u>		



KIMBERLY JAMIESON
My Commission Expires
August 18, 2029
County of Ingham

**CITY OF DETROIT
QUARTERLY REPORT**

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

1. LOBBYIST'S NAME JAMES R. RYAN		2. LOBBYIST'S ID NUMBER 2024-6
3. BUSINESS ADDRESS (All mail will be sent to this address) 123 W. ALLEGAN STE 800 LANSING, MI 48933		4. TELEPHONE NUMBER(S) 513-3713800
<input checked="" type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX		<input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX
5. DATE OF ANNUAL REGISTRATION <small>(DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)</small>	6. PERIOD FOR THIS REPORT 2025 <input type="checkbox"/> 1st Quarter (ending 3 months after annual registration) <input type="checkbox"/> 2nd Quarter (ending 6 months after annual registration) <input checked="" type="checkbox"/> 3rd Quarter (ending 9 months after annual registration) <input type="checkbox"/> 4th Quarter (ending 12 months after annual registration)	
7. NAME OF CLIENT OAKLAND COUNTY BOARD OF COMMISSIONERS & WAYNE COUNTY AIRPORT AUTHORITY		
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. \$ <u>0</u>	9a. \$ <u>0</u>
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....	9b. \$ <u>0</u>	9b. \$ <u>0</u>
9c. ALL OTHER LOBBYING EXPENDITURES	9c. \$ <u>0</u>	9c. \$ <u>0</u>
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ <u>0</u>	9d. \$ <u>0</u>
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.		
JAMES R. RYAN		
Type or print name of lobbyist <u>James R. Ryan</u>		
Signature of lobbyist <u>James R. Ryan</u>		
Subscribed and sworn to me this sworn to before me		
this <u>22nd</u> day of <u>January</u> , <u>2026</u>		
Notary Public, Wayne County, Michigan My Commission Expires: <u>August 18, 2029</u>		
FOR OFFICIAL USE ONLY: Amount of fee paid: \$ 25.00 Date of payment: 1/23/26		



KIMBERLY JAMESON
My Commission Expires
August 18, 2029
County of Ingham
Acting in the County of Wayne

RECEIVED JAN 21 2026

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) JAMES R. RYAN	2. REGISTRANT'S ID NUMBER 2024-6															
3. BUSINESS ADDRESS (All mail will be sent to this address) PUBLIC AFFAIRS ASSOCIATES, LLC 123 W. ALLEGAN STE 800 LANSING, MI 48933	4. TELEPHONE NUMBER(S) (517) 371-3800 () _____															
5. TYPE OF LOBBYIST (Check all applicable boxes.)	<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 type="checkbox"/> A person anticipating expenditures of more than \$250.00 over the next twelve (12) months for lobbying a single public official <small>(See definition of "lobbyist" on reverse)</small>															
6. NAME AND ADDRESS OF CLIENT(S) OAKLAND COUNTY BOARD OF COMMISSIONERS, 1200 N. TELEGRAPH RD. PONTIAC, MI 48341 WAYNE COUNTY AIRPORT AUTHORITY, 11050 ROGELL DR. BLDG 602, DETROIT, MI 48242																
7. VERIFICATION																
<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>JAMES R. RYAN</p> <p>Type or print name of registrant</p> <p><i>[Signature]</i></p> <p>Signature</p> <p>Subscribed and sworn to me this sworn to before me</p> <p>this <u>19th</u> day of <u>January</u>, <u>2026</u></p> <p><i>[Signature]</i></p> <p>Notary Public, Wayne County, Michigan My Commission Expires: <u>August 18, 2029</u></p>																
<p>FOR OFFICIAL USE ONLY:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">DATE OF ANNUAL REGISTRATION</td> <td style="width: 33%;">THIS REGISTRATION IS VALID</td> <td style="width: 33%;">Amount of fee paid</td> </tr> <tr> <td>4 3 2025</td> <td>From 4 3 2025 To 4 3 2026</td> <td>\$ 125.00</td> </tr> <tr> <td>Month Day Year</td> <td>Month Day Year</td> <td>Amount of fee paid</td> </tr> <tr> <td>4 3 2025</td> <td>4 3 2026</td> <td>1/21/26</td> </tr> <tr> <td>Month Day Year</td> <td>Month Day Year</td> <td>Date of payment</td> </tr> </table>		DATE OF ANNUAL REGISTRATION	THIS REGISTRATION IS VALID	Amount of fee paid	4 3 2025	From 4 3 2025 To 4 3 2026	\$ 125.00	Month Day Year	Month Day Year	Amount of fee paid	4 3 2025	4 3 2026	1/21/26	Month Day Year	Month Day Year	Date of payment
DATE OF ANNUAL REGISTRATION	THIS REGISTRATION IS VALID	Amount of fee paid														
4 3 2025	From 4 3 2025 To 4 3 2026	\$ 125.00														
Month Day Year	Month Day Year	Amount of fee paid														
4 3 2025	4 3 2026	1/21/26														
Month Day Year	Month Day Year	Date of payment														



KIMBERLY JAMIESON
My Commission Expires
August 18, 2029
County of Ingham
Acting in the County of *[Signature]*

DATE OF ANNUAL REGISTRATION	THIS REGISTRATION IS VALID	Amount of fee paid
4 3 2025	From 4 3 2025 To 4 3 2026	\$ 125.00
Month Day Year	Month Day Year	Amount of fee paid
4 3 2025	4 3 2026	1/21/26
Month Day Year	Month Day Year	Date of payment

[Signature]