

RECEIVED AUG 01 2025

# 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) <b>Reesa Kossoff</b>	<b>2. REGISTRANT'S ID NUMBER</b> <b>2025-5</b>
<b>3. BUSINESS ADDRESS</b> (All mail will be sent to this address) Service Employees International Union (SEIU) 1800 Massachusetts Ave., NW Washington, D.C. 20036	<b>4. TELEPHONE NUMBER(S)</b> (202) 617-4324
<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 type="checkbox"/> Registered lobbyist under Michigan Law</li> <li><input type="checkbox"/> Registered lobbyist in other states (name state(s)): _____</li> <li><input checked="" 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 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)</li> </ul>	
<b>6. NAME AND ADDRESS OF CLIENT(S)</b> Service Employees International Union (SEIU) 1800 Massachusetts Ave., NW Washington, D.C. 20036	
<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><b>Reesa Kossoff</b>          Type or print name of registrant</p> <p><i>Reesa Kossoff</i>          Signature</p> <p>Subscribed and sworn to me this sworn to before me          this <u>30<sup>th</sup></u> day of <u>July</u>, <u>2025</u></p> <p><i>Melissa A. Anderson</i>          Notary Public, Wayne County, Michigan <i>Phila. PA</i>          My Commission Expires: <u>July 9, 2027</u></p> <div style="border: 1px solid black; padding: 5px; width: fit-content; margin-left: auto;">         Commonwealth of Pennsylvania - Notary Seal          Melissa A. Anderson, Notary Public          Philadelphia County          My Commission Expires July 9, 2027          Commission Number 1192390       </div>	

FOR OFFICIAL USE ONLY:		
<b>DATE OF ANNUAL REGISTRATION</b> <b>8</b> / <b>1</b> / <b>2025</b> Month Day Year	<b>THIS REGISTRATION IS VALID:</b> From <b>8</b> / <b>1</b> / <b>2025</b> Month Day Year To <b>8</b> / <b>1</b> / <b>2026</b> Month Day Year	Amount of fee paid: <b>\$ 125.00</b> Date of payment: <b>8/1/25</b>

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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)

<p>1. LOBBYIST'S NAME <u>Reesa Kossoff</u></p>	<p>2. LOBBYIST'S ID NUMBER <u>2025-5</u></p>										
<p>3. BUSINESS ADDRESS (All mail will be sent to this address) <u>SEIU 1800 Massachusetts Ave NW Washington DC 20036</u></p> <p><input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX</p>	<p>4. TELEPHONE NUMBER(S) <u>(202) 617-4321</u></p> <p><input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX</p>										
<p>5. DATE OF ANNUAL REGISTRATION <u>08 01 2025</u> Month Day Year (DATE ENTERED BY CITY CLERK'S OFFICE ON REGISTRATION FORM)</p>	<p>6. PERIOD FOR THIS REPORT</p> <p><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)</p>										
<p>7. NAME OF CLIENT <u>Service Employees International Union</u></p>											
<p>8. DESCRIPTION OF LOBBYING ACTIVITY DURING THIS QUARTER</p> <p><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></p> <p><input type="checkbox"/> I DID NOT ENGAGE IN LOBBYING ACTIVITY DURING THIS QUARTER.</p>											
<p>9. EXPENDITURES BY CATEGORY</p> <p>9a. COMPLIMENTARY COPIES OF TRADE PUBLICATIONS, BOOKS, REPORTS, PAMPHLETS, CALENDARS, PERIODICALS, OR OTHER INFORMATIONAL MATERIALS .....</p> <p>9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....</p> <p>9c. ALL OTHER LOBBYING EXPENDITURES .....</p> <p>9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, &amp; 9c).....</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 50%;">THIS REPORTING QUARTER</th> <th style="width: 50%;">REGISTRATION DATE THROUGH END OF THIS QUARTER</th> </tr> </thead> <tbody> <tr> <td>9a. \$ <u>0</u></td> <td>9a. \$ _____</td> </tr> <tr> <td>9b. \$ <u>0</u></td> <td>9b. \$ _____</td> </tr> <tr> <td>9c. \$ <u>1295</u></td> <td>9c. \$ _____</td> </tr> <tr> <td>9d. \$ <u>1295</u></td> <td>9d. \$ _____</td> </tr> </tbody> </table>	THIS REPORTING QUARTER	REGISTRATION DATE THROUGH END OF THIS QUARTER	9a. \$ <u>0</u>	9a. \$ _____	9b. \$ <u>0</u>	9b. \$ _____	9c. \$ <u>1295</u>	9c. \$ _____	9d. \$ <u>1295</u>	9d. \$ _____
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9b. \$ <u>0</u>	9b. \$ _____										
9c. \$ <u>1295</u>	9c. \$ _____										
9d. \$ <u>1295</u>	9d. \$ _____										
<p>10. VERIFICATION</p> <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><u>Reesa Kossoff</u> Type or print name of lobbyist</p> <p><u>Reesa Kossoff</u> Signature of lobbyist</p> <p>Subscribed and sworn to me this sworn to before me</p> <p>this <u>21<sup>st</sup></u> day of <u>November</u>, <u>2025</u></p> <p><u>[Signature]</u> Notary Public, Wayne County, Michigan <u>DA</u> My Commission Expires: <u>July 9, 2027</u></p>											

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

FOR OFFICIAL USE ONLY: 325.00 11/25/25

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# CITY OF DETROIT QUARTERLY REPORT

RECEIVED MAR 3 2026

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> Reesa Kossoff	<b>2. LOBBYIST'S ID NUMBER</b> 2025-5	
<b>3. BUSINESS ADDRESS</b> (All mail will be sent to this address) Service Employees International Union 1800 Massachusetts Ave., NW Washington, D.C. 20036 <input type="checkbox"/> IF THIS ADDRESS HAS CHANGED, CHECK BOX	<b>4. TELEPHONE NUMBER(S)</b> 202-617 - 4324 <input type="checkbox"/> IF A NUMBER HAS CHANGED, CHECK BOX	
<b>5. DATE OF ANNUAL REGISTRATION</b> 08                      01                      2025 Month                      Day                      Year (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 checked="" 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)	
<b>7. NAME OF CLIENT</b> Service Employees International Union		
<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.)  Standards presentation to Detroit City Council.  <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	9a. \$ 0
9b. PAYMENTS TO OTHER PERSONS FOR LOBBYING.....	9b. \$ 0	9b. \$ 0
9c. ALL OTHER LOBBYING EXPENDITURES .....	9c. \$ 243	9c. \$ 1,538
9d. TOTAL LOBBYING EXPENDITURES (TOTAL OF 9a, 9b, & 9c).....	9d. \$ 243	9d. \$ 1538
<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. <u>Reesa Kossoff</u> Type or print name of lobbyist		
Signature of lobbyist <u>Reesa Kossoff</u> Subscribed and sworn to me this sworn to before me this <u>26<sup>th</sup></u> day of <u>February</u> , 2026 <u>[Signature]</u> Notary Public, Wayne County, Michigan 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	

**FOR OFFICIAL USE ONLY:**      Amount of fee paid: \$25.00      Date of payment: 3/3/26  
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