Lobbying Firm Activity Authorization

(Government Code Section 86104)

Check *one* box, if applicable

☑ **Lobbyist Employer** (Gov. Code Section 82039.5)

☐ **Lobbying Coalition** (FPPC Regulation 18616.4)

Type or Print in Ink

Legislative Session

2025-2026

(Insert Years)

Page 1 of 2

CALIFORNIA FORM 602

FAIR POLITICAL PRACTICES COMM.

For Official Use Only

RECEIVED
By Shayna Sharke at 3:52 pm, Nov 17, 2025

NAME OF FILER:
City of Dana Point

BUSINESS ADDRESS: (Number and Street) (City) (State) (Zip Code)
33282 Golden Lantern Dana Point CA 92629

MAILING ADDRESS: (If different than above.)

EFFECTIVE DATE:

TELEPHONE NUMBER:
(949) 248-3500

FAX NUMBER: (Optional)
( )

E-MAIL: (Optional)

I hereby authorize Joe A. Gonsalves & Son

(Name of Lobbying Firm)

1201 K Street, Suite 1850, Sacramento, CA 95814

(Business Address)

to engage in the activities of a lobbying firm (as defined in California Government Code Section 82038.5 and 2 Cal. Code of Regs. Section 18238.5) on behalf of the above named employer.

If you are authorizing another lobbying firm to lobby on behalf of your firm's client(s), provide the name(s) of the client(s) below. (It is not necessary to complete the Nature and Interests section.)

NAME OF SUBCONTRACTED CLIENT:	NAME OF SUBCONTRACTED CLIENT:
NAME OF SUBCONTRACTED CLIENT:	NAME OF SUBCONTRACTED CLIENT:

VERIFICATION

I have used all reasonable diligence in preparing this Statement. I have reviewed this Statement and to the best of my knowledge the information contained herein is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 11/17/25
DATE

By _____
SIGNATURE OF RESPONSIBLE OFFICER

Name of Responsible Officer Mike Killebrew
PRINT OR TYPE

Title City Manager

Lobbying Firm Activity Authorization

CALIFORNIA FORM **602**
FAIR POLITICAL PRACTICES COMM.

SEE INSTRUCTIONS ON REVERSE — **Type or Print in Ink**

NAME OF FILER:
City of Dana Point

Nature and Interests of Lobbyist Employer

Check *one* box only:

☐ INDIVIDUAL (Complete only Parts A and E)
☐ BUSINESS ENTITY (Complete only Parts B and E)
☐ INDUSTRY, TRADE OR PROFESSIONAL ASSN. (Complete only Parts C and E)
☑ OTHER (e.g., lobbying coalition) (Complete only Parts D and E)

A. Individual

1. Name and address of employer (or principal place of business if self-employed):

2. Description of business activity in which you or your employer are engaged:

B. Business Entity

Description of business activity in which engaged:

C. Industry, Trade or Professional Association

1. Description of industry, trade or profession represented:

2. Specific description of any portion or faction of the industry, trade, or profession which the association exlusively or primarily represents:

3. Number of members in association *(check appropriate box)*

☐ 50 OR LESS (provide names of all members on an attachment.) ☐ MORE THAN 50

D. Other

1. Statement of nature and purposes:

Local Government-Serving the best interests of the City of Dana Point.

2. Description of any trade, profession, or other group with a common economic interest which is principally represented or from which membership or financial support is principally derived:

E. Industry Group Classification

Check one box which most accurately describes the industry group which you represent. See instructions on reverse.

☐ *AGRICULTURE*
☐ *EDUCATION*
☑ *GOVERNMENT*
☐ *HEALTH*
☐ *LABOR UNIONS*
☐ *LEGAL*
☐ *PUBLIC EMPLOYEES*
☐ *POLITICAL ORGANIZATIONS*
☐ *UTILITIES*
☐ *OTHER:* _____ (Describe in detail)

BUSINESS (Check one of the following sub-categories.)

☐ ENTERTAINMENT/RECREATION
☐ FINANCE/INSURANCE
☐ LODGING/RESTAURANTS
☐ MANUFACTURING/INDUSTRIAL
☐ MERCHANDISE/RETAIL
☐ OIL AND GAS
☐ PROFESSIONAL/TRADE
☐ REAL ESTATE
☐ TRANSPORTATION
☐ OTHER: _____ (Specific Description)