

July 14, 2021

City of Richmond  
450 Civic Center Plaza, Suite 300  
Richmond, CA 94804

Dear Filing Official:

Enclosed please find the original and one copy of the following

**Chevron U.S.A., Inc. and its Affiliates**

- Form 2B - 2021
- Form 3B - 4/1/21 - 6/30/21
- Report sent Federal Express
- Other:

Please endorse this transmittal letter as acknowledgment of receipt of the enclosed report and return it in the stamped envelope provided.

Enclosure  
8298.02



**FORM 3B: QUARTERLY REPORT OF LOBBYIST ACTIVITY  
FOR BUSINESS AND ORGANIZATION LOBBYISTS**

Each lobbyist must file quarterly reports as follows:

- The report for January 1 – March 31 is due no later than **April 15**.
- The report for April 1 – June 30 is due no later than **July 15**.
- The report for July 1 – September 30 is due no later than **October 15**.
- The report for October 1 – December 31 is due no later than **January 15**.

Name of Filer: Chevron Corporation and Its Subsidiaries

**I. INFORMATION ABOUT THE FILER**

Name each employee or member of the filer authorized to contact City officers on behalf of the filer during the reporting period.

Dennis Tuma  
Hakim Johnson

**II. PAYMENT AND LOBBYING INFORMATION (CONTINUED)**

**For each payment made, report the following:**

Report the total amount of payments made by the filer during the reporting period to influence local legislative or administrative action: \$10,178.00

Payment made to: Dennis Tuma

Amount of payment: \$10,00.00

Provide the name and title, if applicable, of each City officer and department contacted by the filer's employees or members *or* by contract lobbyists retained by the filer (if any), during the reporting period:

<u>Name</u>	<u>Title</u>	<u>Department</u>
Eric Govan	Fire Marshal	City of Richmond, Fire Department
Eric Munson	Deputy Fire Marshal	City of Richmond, Fire Department
Luis Padilla	Fire Inspector	City of Richmond, Fire Department
Dante Wiley	Fire Inspector	City of Richmond, Fire Department

Describe in detail each local legislative or administrative action the filer sought to influence during the reporting period, and the outcome sought by the filer.

Continued discussions with staff members of the Richmond Fire Department regarding code compliance and permit closure.

For multiple payments, please photocopy this sheet and attach additional sheets.

**II. PAYMENT AND LOBBYING INFORMATION (CONTINUED)**

**For each payment made, report the following:**

Report the total amount of payments made by the filer during the reporting period to influence local legislative or administrative action: \$ See first page

Payment made to: Hakim Johnson

Amount of payment: \$178.00

Provide the name and title, if applicable, of each City officer and department contacted by the filer's employees or members *or* by contract lobbyists retained by the filer (if any), during the reporting period:

<u>Name</u>	<u>Title</u>	<u>Department</u>
Lina Velasco	Community Development Director	Planning, City of Richmond
Heather McLaughlin	Interim Sr. Assistant	City Attorney's Office of Richmond
LaShonda White	Management Analyst	City Manager's Office of Richmond

Describe in detail each local legislative or administrative action the filer sought to influence during the reporting period, and the outcome sought by the filer.

Discussions with city's planning department regarding guidance for emission reduction project, a modernization project mitigative measure. Discussion with city's attorney's office regarding amendments to Environmental and Community Investment Agreement to support budget balancing strategy during the pandemic.

For multiple payments, please photocopy this sheet and attach additional sheets.

### III. REPORT OF ACTIVITY EXPENSES

Report the total amount of activity expenses incurred by the filer during the reporting period:

**For each activity expense incurred, report the following:**

Date of expense: N/A

Amount of expense: N/A

Name and official title, if any, of the beneficiary of the activity expense, and the portion of the total cost of the activity that represents the value of the benefit conferred on the beneficiary:

<u>Name</u>	<u>Title</u>	<u>Value conferred on Beneficiary</u>
N/A	N/A	N/A

Describe the benefit conferred:

Name the payee of the expense if other than the beneficiary:

If the activity expense is the salary of an employee of the filer who serves as a City officer, name the employee, indicate the employee's official title, and indicate the salary range paid to the employee during the reporting period by checking off the appropriate box below:

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Name

Official Title

Salary Expense:

- up to \$250
- more than \$250 but less than or equal to \$1,000
- more than \$1,000 but less than or equal to \$10,000
- more than \$10,000

#### **IV. REPORT OF POLITICAL CONTRIBUTIONS**

Report the total amount of political contributions made or delivered by the filer, or for which the filer served as an agent or intermediary, during the two months preceding this filing.

**For each political contribution of \$100 or more, report the following:**

Name the City officer, candidate for City office or committee to which the contribution was made:

Amount of the contribution: \$0.00

- Check all that apply:
- Filer made the contribution
  - Filer delivered the contribution
  - Filer arranged for the contribution
  - Filer served as an agent or intermediary in making the contribution

If the filer delivered a contribution from another source or arranged or served as an agent or intermediary in making a contribution for another, identify the true source of the funds:

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If additional space is required, check here and attach additional sheet

ORIGIN ID:SRFA (415) 389-6800  
GATE CASTONGUAY  
NIELSEN, MERKSAMER ET AL  
2350 KERNER BLVD, SUITE 250

SHIP DATE: 14JUL21  
ACTWGT: 1.00LB  
CAD: 2407613/MET4340

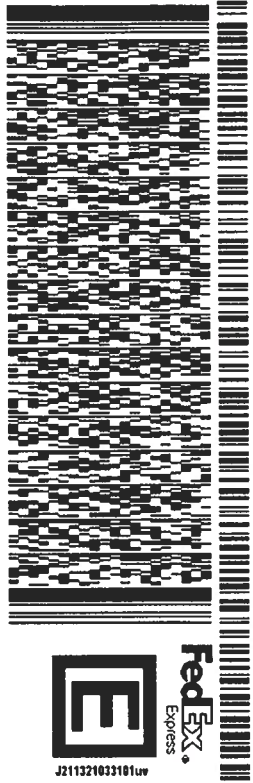
SAN RAFAEL, CA 94901  
UNITED STATES US

BILL SENDER

TO CITY OF RICHMOND  
CITY CLERK  
450 CIVIC CENTER PLAZA, STE 300

RICHMOND CA 94804

(415) 634-6848 REF: 8298 029, Q2 REPORT  
PO INV DEPT



TRK# 77 42 6344 0690  
0201

THU - 15 JUL 4:30P  
STANDARD OVERNIGHT

WA JEMA

94804  
CA-US OAK



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**After printing this label:**

1. Use the 'Print' button on this page to print your label to your laser or inkjet printer.
2. Fold the printed page along the horizontal line.
3. Place label in shipping pouch and affix it to your shipment so that the barcode portion of the label can be read and scanned.

**Warning:** Use only the printed original label for shipping. Using a photocopy of this label for shipping purposes is fraudulent and could result in additional billing charges, along with the cancellation of your FedEx account number. Use of this system constitutes your agreement to the service conditions in the current FedEx Service Guide, available on [fedex.com](http://fedex.com). FedEx will not be responsible for any claim in excess of \$100 per package, whether the result of loss, damage, delay, non-delivery, misdelivery, or misinformation, unless you declare a higher value, pay an additional charge, document your actual loss and file a timely claim. Limitations found in the current FedEx Service Guide apply. Your right to recover from FedEx for any loss, including intrinsic value of the package, loss of sales, income interest, profit, attorney's fees, costs, and other forms of damage whether direct, incidental, consequential, or special is limited to the greater of \$100 or the authorized declared value. Recovery cannot exceed actual documented loss. Maximum for items of extraordinary value is \$1,000, e.g. jewelry, precious metals, negotiable instruments and other items listed in our Service Guide. Written claims must be filed within strict time limits, see current FedEx Service Guide.