	X REPO	ORT OF LOBBYI	ST EMPLOYER	2		
	<del></del>	(Government Code S		•	1/5	
		or	,		1	
	□ REPO	ORT OF LOBBYI	NG COALITION	J		
		Cal. Code of Regs. S		•		
<b>FORM 635</b>	`	ŭ	,			
1993		NT: Lobbying Co		ch a		
	con	npleted Form 635-0	to this Report.			
	REPORT COVERS PE	ERIOD FROM 01/01/2	onga THROUGH	03/31/2023		_
				03/31/2023	FOR OFFICIAL USE ONLY	
	CUMULATIVE PERIO	D BEGINNING	01/01/2023		A	
		TYPE OR PRIN			В	_
	to be provided to you pursu closure Provisions of the Po		ctices Act of 1977, see	Intormation_		
NAME OF FILER:						_
CENTRAL DELTA W	ATER AGENCY					
BUSINESS ADDRESS: (N	umber and Street)	(City)	(State)	(Zip Code)	TELEPHONE NUMBER:	
		STOCKT	ON CA	95207		
PART I - LEGISLATI See instructions on reve	VE OR STATE AGENCY	ADMINISTRATIVE A	CTIONS ACTIVELY	LOBBIED DURIN	G THE PERIOD	
					ate budget Delta levee fundi -	_
If more space is nee	ded, check box and attach conti	inuation sheets.				
	,					_
		SUMMARY OF PA	YMENTS THIS PE	RIOD		
A. Total Payments to	o In-House Employee Lobby	vists (Part III, Section A, C	olumn 1)	\$	0.00	
B. Total Payments to	b Lobbying Firms (Part III, S	ection B, Column 4)		\$	7650.00	
C. Total Activity Exp	enses (Part III, Section C)			\$	0.00	
D. Total Other Paym	nents to Influence (Part III, S	ection D)		\$	0.00	
-						
GRAND <sup>1</sup>	TOTAL (A + B + C + D at	oove)		\$	7650.00	
E. Total Payments in	n Connection with PUC Activ	vities (Part III, Section E) .		\$	0.00	
F. Campaign Contrib	outions: Part IV con	npleted and attached	X No camp	aign contributions m	ade this period	
		VERIFI	CATION			
				eport and to the bes	st of my knowledge the informa-	
	d herein and in the attache penalty of perjury under		•	going is true and co	orrect	
	perjury under					_
Executed on (Date) 04/17/2023		At (City and State) Stockton,CA		By (Signature of Em Dante John Noi	ployer or Responsible Officer) mellini	
Name of Employer or Respo Dante John Nomellii	onsible Officer (Type or Print) ni			Title Manager/Co-Co	unsel	-
				1		

NAME OF FILER: CENTRAL DELTA WATER AGENCY

PART II - PARTNERS, OWNERS, AND EMPLOYEES WHOSE "LOBBYIST REPORTS" (FORM 615) ARE ATTACHED TO THIS REPORT (See instructions on reverse.)							
Name and Title		Name and	d Title				
If more space is needed, check box and attach continuate	ion sheets.						
PART III - PAYMENTS MADE IN CONNECTIO	N WITH LOBB	YING ACTIVITIE	s				
A. PAYMENTS TO IN-HOUSE EMPLOYEE LOBBYISTS     (See instructions on reverse. Also enter the Amount This Period     (Column 1) on Line A of the Summary of Payments section on page 1.)			(1) Amount This Period		(2) Cumulative Total To Date		
(Column 1) on Line A of the Summary of Fayments Section on page 1.)			\$ 0.00		\$	0.00	
B. PAYMENTS TO LOBBYING FIRMS (Inclu	uding Individual C	Contract Lobbyists)					
Name and Address of Lobbying Firm/Independent Contractor	(1) Fees & Retainers	(2) Reimbursements of Expenses	(3) Advances or Other Payments (attach explanation)		(4) Total This Period	(5) Cumulative Total to Date	
Nomellini,Grilli & McDaniel Law Office	7650.00	0.00	0.00		7650.00	7650.00	
Stockton CA 95202  Mohan, Harris & Ruiz  Stockton CA 95219	0.00	0.00	0.00		0.00	0.00	
Sincator Ca. Saz 19							
If more space is needed, check box and attach continuation sheets	Also ente	THIS PERIOD ( er the total of Colur y of Payments sect	nn 4 on Line B of the	\$	7650.0	00	

PERIOD COVERED: 01/01/2023 03/31/2023

NAME OF FILER: CENTRAL DELTA WATER AGENCY

C. ACTIVITY EXPENSES (See instructions on reverse.)						
Date	Name and Address of Payee	Name and Official Positio of Reportable Persons ar Amount Benefiting Each	Description of Consideration	To Amo of Ac		
			\$		\$	
If more space is needed, check box and attach continuation sheets.  TOTAL SECTION C (Activity Expenses) Also enter the total of Section C on Line C of the Summary of Payments section on page 1.						0.00
D. OTHER PAYMENTS TO INFLUENCE LEGISLATIVE OR ADMINISTRATIVE ACTION  IN NOTE: State and local government agencies do not complete this section. Check box and complete Attachment Form 640 instead.  1. PAYMENTS TO LOBBYING COALITIONS (NOTE: You must attach a completed Form 630 to this Report.)  \$ 0.00						
2. OTHER PAYMENTS  TOTAL SECTION D (1 + 2) Also enter the total of Section D on Line D of the Summary of Payments section on page 1.					\$	0.00
E. PAYMENTS IN CONNECTION WITH ADMINISTRATIVE TESTIMONY IN RATEMAKING PROCEEDINGS BEFORE THE CALIFORNIA PUBLIC UTILITIES COMMISSION Also, enter the total of Section E on Line E of the Summary of Payments section on page 1. (See instructions on reverse.)					\$	0.00

PERIOD COV	ERED: 01/01/2023 03/31/2023					
NAME OF FIL	ER: CENTRAL DELTA WATER AGENCY					
made to or on	<b>CAMPAIGN CONTRIBUTIONS MADE</b> (Monetary and non-mone behalf of <u>state</u> candidates, elected state officers and any of their controlled conficers must be reported in A or B below.)	etary campaign contributions of ommittees, or committees suppo				
in a iden	e contributions made by you during the period covered by this report, campaign disclosure statement which is on file with the Secretary of Stification number, if any, below.	State, report the name of the	committee and its			
Name of Major Donor or Recipient Committee Which Has Filed A Campaign Disclosure Statement:  Recipient Committee:						
	tributions of \$100 or more which have not been reported on a campai be by an organization's sponsored committee, must be itemized below		luding contributions			
Date	Name of Recipient	I.D. Number if Committee	Amount			
			\$			
			\$			
			\$			
			\$			
			\$			
			\$			
			\$			
			\$			
			\$			
			\$			
If mor	If more space is needed, check box and attach continuation sheets.					

## **Attachment Form 640**

(Attachment to Form 635 or Form 645)

CALIFORNIA
1993 FORM
640

5/5

PERIOD COVERED: 01/01/202303/31/2023								
NAME OF	FILER: CENTRAL DELTA WATER AGENCY							
	For Use By: A state or local government agency that qualifies as a lobbyist employer or a \$5,000 filer. Refer to the instructions on the cover page before completing this attachment.							
Other I	Payments to Influence Legislative or Administrative Action:							
1.	Total payments for overhead expenses related to lobbying activity. Report as a lump sum.			\$	0.00			
Total payments to Lobbying Coalitions. Report as a lump sum.  (Form 630 must be attached)				\$	0.00			
Total payments of less than \$250 during the calendar quarter for lobbying activity (excluding overhead). Report as a lump sum.				\$	0.00			
4.	Total payments of more than \$250 during the calendar quarter for lobbying activity (excluding overhead). Such payments must be itemized below				0.00			
5.	5. Grand total of "Other Payments to Influence Legislative or Administrative Action." Also enter this total on the appropriate line of the Summary of Payments section on Page 1 of Form 635 or Form 645.			\$	0.00			
legislative session covered by the report.  Also itemize dues or similar payments of \$250 or more made to an organization that makes expenditures equal to 10% of its total expenditures or \$15,000 or more in a calendar quarter to influence legislative or administrative action. Provide the organization's name and address, the amount paid to the organization during the quarter, and the cumulative amount paid to the organization since January 1 of the biennial legislative session covered by the report.								
Name & Address of Payee Amount This C Quarter				umulative Amount Since January 1				
		\$	\$					
		\$	\$					
		\$	\$					
	Subtotal of all payments itemized above	\$ 0.00						
_	f more space is needed, check box and attach continuation sheets.							