



City of Hollister Lobbyist Quarterly Report

Pursuant to Hollister Municipal Code,
Chapter 1.20, of Title 1, Lobbying

For Official Use Only

Use this form for Quarterly Reports if you are registered as a Contract, In-House, or Expenditure Lobbyist. Do **NOT** use this form for quarterly or update reporting for *Land Use Lobbyists*.

Section 1: Quarterly Reporting Period

Year: 2026

Date of Report 4/1/26

First Quarter
Jan - Mar

Second Quarter
Apr - Jun

Third Quarter
Jul - Sep

Fourth Quarter
Oct - Dec

File using Annual Renewal Form

Section 2: Applicant Information

Applicant Name: K2 SOLUTIONS LLC (KARSON KLAWER)

Business Address 1485 ROSEBUD CT. HOLLISTER CA 95023
Street City State Zip

Mailing Address (if different) _____
Street City State Zip

Phone Number: (831)807-0858 Fax Number _____

Email: K2SOLUTIONS.SBC@GMAIL.COM

Website Address (if applicable) K2SOLUTIONSLLC.COM

Section 3: Applicant Type – Please check applicable box(es)

- Contract Lobbyist** (If checked, complete Section 3)
- In-House Lobbyist** (if checked, complete Section 4)
- Expenditure Lobbyist** (If checked, complete Section 4)

All applicants must complete the applicable section(s) (see above) as well signing in Section 7, Certification.

City of Hollister General Lobbyist Quarterly Report

Section 4: Nothing to Report

Please click here if there have been no changes since your last report.
If checked, proceed to section 7, Certification.

Section 5: Contract Lobbyist Information

List all Clients represented:

1. Name: DANNIS, WOLLIER + KEWEY

Briefly describe the legislative or administrative action(s) the lobbyist seeks to influence:

I AM ASSISTING DAK + THE SAN BENITO HIGH SCHOOL DISTRICT IN THEIR EFFORTS TO BUILD A HIGH SCHOOL + WORKFORCE HOUSING.

List all persons employed or retained to engage in Lobbying Activity on behalf of this client:

a KARON KLAWER b _____ c _____

d _____ e _____ f _____

Total compensation promised or received from this client during the previous calendar quarter for Lobbying Activity

\$0 - \$100,000
 Over \$100,000

2. Name: BOB ENZ

Briefly describe the legislative or administrative action(s) the lobbyist seeks to influence:

I AM ASSISTING MR. ENZ WITH PERMITTING + CONDITION COMPLIANCE FOR HIS MINI/RV STORAGE PROJECT ON AIRWAY DR.

List all persons employed or retained to engage in Lobbying Activity on behalf of this client:

a KARON KLAWER b _____ c _____

d _____ e _____ f _____

Total compensation promised or received from this client during the previous calendar quarter for Lobbying Activity

\$0 - \$100,000
 Over \$100,000

3. Name: TIM JOHNSON

Briefly describe the legislative or administrative action(s) the lobbyist seeks to influence:

I AM ASSISTING MR JOHNSON IN GETTING HIS PROPERTY AT THE CORNER OF ENTERPRISE + SOUTHWIDE ROADS INCLUDED IN THE PROPOSED SPHERE OF INFLUENCE.

List all persons employed or retained to engage in Lobbying Activity on behalf of this client:

a KARON KLAWER b _____ c _____

d _____ e _____ f _____

Total compensation promised or received from this client during the previous calendar quarter for Lobbying Activity

\$0 - \$100,000
 Over \$100,000

For additional Clients, please add additional sheets.

City of Hollister Lobbyist Quarterly Report

Section 6: In-House / Expenditure Lobbyist Information

List the names of each owner, officer, and employee conducting Lobbying Activities on behalf of this organization

a _____	b _____	c _____
d _____	e _____	f _____
g _____	h _____	i _____
j _____	k _____	l _____
m _____	n _____	o _____
p _____	q _____	r _____
s _____	t _____	u _____

Brief description of the legislative or administrative action(s) the lobbyist seeks to influence:

City of Hollister Lobbyist Quarterly Report

Section 7: Certification

I hereby certify that the information provided in this application is true and accurate to the best of my knowledge and belief. I understand that false statements made herein may be punishable as perjury.



Signature



Date



Printed Name

Disclaimer: This information is a summary based on the provided ordinance. Always refer to the official City of Hollister Lobbyist Ordinance and consult with the City Clerk's office for the most accurate and up-to-date information on registration procedures, reporting requirements, and all other aspects of the ordinance.



City of Hollister Quarterly Update Report – Land Use Lobbyist

Pursuant to Hollister Municipal Code,
Chapter 1.20, of Title 1, Lobbying

For Official Use Only

Use this form for Quarterly and Update Reports for Land Use Lobbyists. For all other lobbyist types, use the General Quarterly reporting form.

Section 1: Reporting Type / Period

Year: <u>2026</u>		Date of Report: <u>4/1/26</u>	
First Quarter <i>Jan - Mar</i>	<input checked="" type="checkbox"/>	Second Quarter <i>Apr - Jun</i>	<input type="checkbox"/>
Third Quarter <i>Jul - Sep</i>	<input type="checkbox"/>	Fourth Quarter <i>Oct - Dec</i>	<input type="checkbox"/>
Meeting Update Report		<input type="checkbox"/>	
		File using Annual Renewal Form	

Section 2: Applicant Information

Applicant Name: <u>K2 Solutions LLC (KARSON KLAWER)</u>			
Business Address	<u>1485 ROSEBUD CT.</u>	<u>HOLLISTER</u>	<u>CA</u> <u>95023</u>
	<small>Street</small>	<small>City</small>	<small>State</small> <small>Zip</small>
Mailing Address <i>(if different)</i>	_____	_____	_____
	<small>Street</small>	<small>City</small>	<small>State</small> <small>Zip</small>
Phone Number:	<u>(831)801-0858</u>	Fax Number	_____
Email:	<u>K2SOLUTIONS.SBC@GMAIL.COM</u>		
Website Address <i>(if applicable)</i>	<u>K2SOLUTIONSLLC.COM</u>		

Section 3: Nothing to Report

Please click here if there have been no changes since your last report <i>If checked, proceed to section 6, Certification. Otherwise, complete sections 4, 5 and 6.</i>	<input type="checkbox"/>
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Disclaimer: This information is a summary based on the provided ordinance. Always refer to the official City of Hollister Lobbyist Ordinance and consult with the City Clerk's Office for the most accurate and up-to-date information on registration procedures, reporting requirements, and all other aspects of the ordinance.

City of Hollister Quarterly Update Report – Land Use Lobbyist

Section 4: Land Use Lobbyist Information

For **EACH** major land use approval that the lobbyist has attempted to influence during the reporting period, please provide the following information. **Please use additional sheets as necessary.**

Land Use approval # _____

Enter a unique number starting with 1, for each project. Used when more than one project is being lobbied for.

Description of the major land use approval

Summary of activities during the reporting period relating to influencing this major land use approval

Total amount expended during the reporting period related to influencing this major land use approval:

List of entities to which payments of \$500.00 or more, in the aggregate, during the reporting period for activities relating to influencing this major land use approval

Name: _____

Date of Payment: _____ Amount of Payment: _____

Purpose of Payment:

Name: _____

Date of Payment: _____ Amount of Payment: _____

Purpose of Payment:

Name: _____

Date of Payment: _____ Amount of Payment: _____

Purpose of Payment:

Name: _____

Date of Payment: _____ Amount of Payment: _____

Purpose of Payment:

Continues on next page...

City of Hollister Quarterly Update Report – Land Use Lobbyist

List of contacts by the lobbyist, including by its officers, employees, agents, and members, with public officials for the purpose of influencing this major land use approval	
Land Use approval # _____ <i>Enter number from previous page, to uniquely identify each project. Used when more than one project is being lobbied for.</i>	
Public Official Name: _____	Date: _____
Nature of Contact: _____	
Public Official Name: _____	Date: _____
Nature of Contact: _____	
Public Official Name: _____	Date: _____
Nature of Contact: _____	
Public Official Name: _____	Date: _____
Nature of Contact: _____	
Public Official Name: _____	Date: _____
Nature of Contact: _____	
Public Official Name: _____	Date: _____
Nature of Contact: _____	
Public Official Name: _____	Date: _____
Nature of Contact: _____	
Public Official Name: _____	Date: _____
Nature of Contact: _____	
Public Official Name: _____	Date: _____
Nature of Contact: _____	
Public Official Name: _____	Date: _____
Nature of Contact: _____	
Public Official Name: _____	Date: _____
Nature of Contact: _____	

