**Report of Lobbying Firm - Form 625**

**REPORT OF LOBBYING FIRM**  
(Government Code Section 86114)

**FORM 625**  
1990

**REPORT COVERS PERIOD FROM** 01-01-2011 **THROUGH** 03-31-2011  
**CUMULATIVE PERIOD BEGINNING** 01-01-2011

**TYPE OR PRINT IN INK**

*For information required to be provided to you pursuant to the Information Practices Act of 1977, see Information Manual on Lobbying Disclosure Provisions of the Political Reform Act.*

**NAME OF LOBBYING FIRM:**

Jordan Woods Investment Management Company

**BUSINESS ADDRESS:** (Number and Street)  
152 Broad Street  
New York  
NY  
10012

**TELEPHONE NUMBER:**  
212  555-1234

**MAILING ADDRESS:** (If different than above)

**PART I** - (Read the instructions on the reverse before completing this section. Then, check one of the boxes below and complete Part I.)

- [X] PARTNERS, OWNERS, OFFICERS, OR EMPLOYEES WHOSE "LOBBYIST REPORTS" (FORM 615) ARE ATTACHED TO THIS REPORT OR
- [ ] PARTNERS, OWNERS, OFFICERS, OR EMPLOYEES WHO ENGAGED IN DIRECT COMMUNICATION ON AT LEAST FIVE SEPARATE OCCASIONS DURING THE PERIOD

**Jordan E Woods**

If more space is needed, check box and attach continuation sheets.

**SUMMARY OF PAYMENTS THIS PERIOD**

<table>
<thead>
<tr>
<th>A. GRAND TOTAL PAYMENTS RECEIVED: (From Subtotals in Part II)</th>
<th>$300,000</th>
</tr>
</thead>
<tbody>
<tr>
<td>B. TOTAL ACTIVITY EXPENSES: (From Part III, Section A, 3)</td>
<td>$0</td>
</tr>
<tr>
<td>C. TOTAL PAYMENTS TO OTHER LOBBYING FIRMS: (From Part III, Section B)</td>
<td>$0</td>
</tr>
<tr>
<td>D. GRAND TOTAL PAYMENTS MADE: (B + C, above)</td>
<td>$0</td>
</tr>
</tbody>
</table>

**VERIFICATION**

I have used all reasonable diligence in preparing this Report. I have reviewed the Report and to the best of my knowledge the information contained herein and in the attached schedules 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: 04-25-2011  
At: New York, NY  
By: (Signature of Responsible Officer) Jordan E Woods

**Note:** This must be the same person listed as the Responsible Officer on the Form 601.
### Jordan Woods Investment Management Company

**Redrock Inc.**  (601) 555-5678  
1725 Savannah Pl., Chicago, IL 60202

**Investors Bank LLC**  (415) 555-4456  
170 Wall Street, San Francisco, CA 94102

<table>
<thead>
<tr>
<th>Employer's Name, Address and Telephone Number</th>
<th>Fees and Retainers</th>
<th>Reimbursements of Expenses</th>
<th>Advances or Other Payments (attach explanation)</th>
<th>Total This Period</th>
<th>Cumulative Total to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Redrock Inc.</strong></td>
<td>$125,000</td>
<td>$</td>
<td>$</td>
<td>$125,000</td>
<td>$125,000</td>
</tr>
<tr>
<td><strong>Investors Bank LLC</strong></td>
<td>$175,000</td>
<td>$</td>
<td>$</td>
<td>$175,000</td>
<td>$175,000</td>
</tr>
</tbody>
</table>

**CalPERS: Investments**

**CalSTRS: Investments**

**CalPERS: Investments**

**CalSTRS: Investments**

SUBTOTAL $300,000
# Part III - Payments Made in Connection with Lobbying Activities

**Section A: Activity Expenses** (See instructions on reverse.)

<table>
<thead>
<tr>
<th>Date</th>
<th>Name and Address of Payee</th>
<th>Name and Official Position of Reportable Persons and Amount Benefiting Each</th>
<th>Description of Consideration</th>
<th>Total Amount of Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>$</td>
<td></td>
<td>$</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- If more space is needed, check box and attach continuation sheets

**Total Section A.1.** (Include all subtotals from Continuation Sheets) $0

2. **Total Activity Expenses Paid, Incurred, or Arranged by all Lobbyists Employed by the Lobbying Firm which have been or will be reimbursed or paid by the firm.** $0

3. **Total Activity Expenses (Section A, Parts 1 + 2)** $0
**PART III - PAYMENTS MADE** (Continued)

<table>
<thead>
<tr>
<th>Name, Address and Telephone Number of Firm Contracted With</th>
<th>Name of Employer or Client for Whom Subcontractor was Retained to Lobby</th>
<th>Amount This Period</th>
<th>Cumulative Total to Date</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

If more space is needed, check box and attach continuation sheets.

**TOTAL PAYMENTS**

Total Payments (Include all subtotals from continuation sheets) $0

**PART IV - CAMPAIGN CONTRIBUTIONS MADE**

(Monetary and non-monetary campaign contributions of $100 or more made to or on behalf of state candidates, elected state officers and any of their controlled committees, or committees supporting such candidates or officers must be reported in A or B below.)

A. If the contributions made by you during the period covered by this report, or by a committee you sponsor, are contained in a campaign disclosure statement which is on file with the Secretary of State, report the name of the committee and its identification number, if any, below.

Name of Major Donor or Recipient Committee Which Has Filed a Campaign Disclosure Statement: ____________________________

Identification Number if Recipient Committee: ____________________________

B. Contributions of $100 or more which have not been reported on a campaign disclosure statement, including contributions made by an organization’s sponsored committee, must be itemized below.

<table>
<thead>
<tr>
<th>Date</th>
<th>Name of Recipient</th>
<th>I.D. Number if Committee</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>$</td>
</tr>
</tbody>
</table>

If more space is needed, check box and attach continuation sheets.

**NOTE:** Disclosure in this report does not relieve a filer of any obligation to file the campaign disclosure statements required by Gov. Code Section 84200, et seq.
# Lobbyist Report - Form 615

## LOBBYIST REPORT
(Government Code Section 86113)

REPORT COVERS PERIOD FROM **01-01-2011** THROUGH **03-31-2011**

**FORM 615**

**NAME:** Woods

**NAME OF FIRM, EMPLOYER, OR COALITION:** Jordan Woods Investment Management Company

**BUSINESS ADDRESS:** 152 Broad Street

**MAILING ADDRESS:** New York, NY 10012

**TELEPHONE NUMBER:** 212-555-1234

---

### PART I - ACTIVITY EXPENSES PAID, INCURRED, ARRANGED OR PROVIDED BY THE LOBBYIST

I have reviewed the form and instructions for reporting Activity Expenses and I have nothing to report.

<table>
<thead>
<tr>
<th>Date</th>
<th>Name and Address of Payee</th>
<th>Name and Official Position of Reportable Persons and Amount Benefiting Each</th>
<th>Description of Consideration</th>
<th>Total Amount of Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>$</td>
<td></td>
<td>$</td>
</tr>
</tbody>
</table>

If more space is needed, check box and attach continuation sheets

### PART II - CAMPAIGN CONTRIBUTIONS MADE OR DELIVERED

I have reviewed the form and instructions for reporting Campaign Contributions Made or Delivered and:

- [ ] Part II has been completed and is attached.
- [X] I have nothing to report.

---

**VERIFICATION**

I have used all reasonable diligence in preparing this Report. I have reviewed the Report and to the best of my knowledge the information contained herein and in the attached schedules 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 (DATE)**

**AT (CITY AND STATE)**

**BY (SIGNATURE OF LOBBYIST)**

Must be signed by lobbyist.
REPORT OF LOBBYIST EMPLOYER
(Government Code Section 86116)

REPORT COVERS PERIOD FROM 01-01-2011 THROUGH 03-31-2011
CUMULATIVE PERIOD BEGINNING 01-01-2011

FPPC TAD • 01
8-1-2011 • Page 6 of 10

NAME OF FILER:

Investors Bank LLC

BUSINESS ADDRESS: (Number and Street) (City) (State) (Zip Code)
170 Wall Street San Francisco CA 94102

TELEPHONE NUMBER: (415) 555-4456

PART I - LEGISLATIVE OR STATE AGENCY ADMINISTRATIVE ACTIONS ACTIVELY LOBBIED DURING THE PERIOD
(See instructions on reverse.)

CalPERS: Investments

CalSTRS: Investments

If more space is needed, check box and attach continuation sheets.

SUMMARY OF PAYMENTS THIS PERIOD

A. Total Payments to In-House Employee Lobbyists (Part III, Section A, Column 1) ........................................................................ $ 5,000
B. Total Payments to Lobbying Firms (Part III, Section B, Column 4) ........................................................................ $ 175,000
C. Total Activity Expenses (Part III, Section C) ........................................................................ $ 0
D. Total Other Payments to Influence (Part III, Section D) ........................................................................ $ 6,500

GRAND TOTAL (A + B + C + D above) ........................................................................ $ 186,500

E. Total Payments in Connection with PUC Activities (Part III, Section E) ........................................................................ $ 0

F. Campaign Contributions: □ Part IV completed and attached □ No campaign contributions made this period

VERIFICATION

I have used all reasonable diligence in preparing this Report. I have reviewed the Report and to the best of my knowledge the information contained herein and in the attached schedules 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 (Date) At (City and State) By (Signature of Employer or Responsible Officer)
04-25-2011 San Francisco, CA

May be signed by any Responsible Officer of the filer.

Name of Employer or Responsible Officer (Type or Print) Signing Officer’s Name
San Francisco, CA

Title Signing Officer’s Title
**PART II - PARTNERS, OWNERS, AND EMPLOYEES WHOSE "LOYLIST REPORTS" (FORM 615) ARE ATTACHED TO THIS REPORT** (See instructions on reverse.)

<table>
<thead>
<tr>
<th>Name and Title</th>
<th>Name and Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dan Dobbins</td>
<td></td>
</tr>
</tbody>
</table>

☐ If more space is needed, check box and attach continuation sheets.

**PART III - PAYMENTS MADE IN CONNECTION WITH LOBBYING ACTIVITIES**

<table>
<thead>
<tr>
<th>A. PAYMENTS TO IN-HOUSE EMPLOYEE LOBBYISTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>See instructions on reverse. Also enter the Amount This Period (Column 1) on Line A of the Summary of Payments section on page 1.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>(1) Amount This Period</th>
<th>(2) Cumulative Total To Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>$5,000</td>
<td>$5,000</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>B. PAYMENTS TO LOBBYING FIRMS (Including Individual Contract Lobbyists)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name and Address of Lobbying Firm/Independent Contractor</td>
</tr>
<tr>
<td>-------------------------------------------------------------</td>
</tr>
<tr>
<td>Jordan Woods Investment Mgmt. Co.</td>
</tr>
</tbody>
</table>

☐ If more space is needed, check box and attach continuation sheets.

TOTAL THIS PERIOD (Column 4) Also enter the total of Column 4 on Line B of the Summary of Payments section on page 1. $175,000
### C. Activity Expenses

**NAME OF FILER:** Investors Bank LLC  
**PERIOD COVERED:** 01-01-2011 - 03-31-2011

<table>
<thead>
<tr>
<th>Date</th>
<th>Name and Address of Payee</th>
<th>Name and Official Position of Reportable Persons and Amount Benefiting Each</th>
<th>Description of Consideration</th>
<th>Total Amount of Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>$</td>
<td></td>
<td>$</td>
</tr>
</tbody>
</table>

☐ 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

### D. Other Payments to Influence Legislative or Administrative Action

☐ 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  

2. OTHER PAYMENTS  
   $6,500

**TOTAL SECTION D**  
Also enter the total of Section D on Line D of the Summary of Payments section on page 1.  

$6,500

### E. Payments in Connection with Administrative Testimony in Ratemaking Proceedings Before the California Public Utilities Commission

**NOTE:** Also enter the total of Section E on Line E of the Summary of Payments section on page 1. (See instructions on reverse.)  

$0
**PART IV – CAMPAIGN CONTRIBUTIONS MADE**
(Monetary and non-monetary campaign contributions of $100 or more made to or on behalf of state candidates, elected state officers and any of their controlled committees, or committees supporting such candidates or officers must be reported in A or B below.)

A. If the contributions made by you during the period covered by this report, or by a committee you sponsor, are contained in a campaign disclosure statement which is on file with the Secretary of State, report the name of the committee and its identification number, if any, below.

Name of Major Donor or Recipient Committee Which Has Filed A Campaign Disclosure Statement: ____________________________

Identification Number if Recipient Committee: ____________________________

B. Contributions of $100 or more which have not been reported on a campaign disclosure statement, including contributions made by an organization's sponsored committee, must be itemized below.

<table>
<thead>
<tr>
<th>Date</th>
<th>Name of Recipient</th>
<th>ID. Number if Committee</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td>$</td>
</tr>
</tbody>
</table>

No need to complete this page if the box on Page 1 is checked that indicates there are no campaign contributions to report.

☐ If more space is needed, check box and attach continuation sheets.
Lobbyist Report - Form 615

LOBBYIST REPORT
(Government Code Section 86113)

REPORT COVERS PERIOD FROM 01-01-2011 THROUGH 03-31-2011

IMPORTANT: This report is to be completed by the lobbyist and attached to the Report of Lobbying Firm (Form 615) or Report of Lobbyist Employer/Report of Lobbying Coalition (Form 635), whichever is applicable.

TYPE OR PRINT IN INK

For information required to be provided to you pursuant to the Information Practices Act of 1977, see Information Manual on Lobbying Disclosure Provisions of the Political Reform Act.

NAME: (Last) (First) (M.I.)
Dobbins Dan

NAME OF FIRM, EMPLOYER, OR COALITION:
Investors Bank LLC

BUSINESS ADDRESS: (Number and Street) (City) (State) (Zip Code)
170 Wall Street San Francisco CA 94102

TELEPHONE NUMBER:
415 555-4456

MAILING ADDRESS: (If different than above)

PART I - ACTIVITY EXPENSES PAID, INCURRED, ARRANGED OR PROVIDED BY THE LOBBYIST (See definitions and instructions on reverse.)

X I have reviewed the form and instructions for reporting Activity Expenses and I have nothing to report.

<table>
<thead>
<tr>
<th>Date</th>
<th>Name and Address of Payee</th>
<th>Name and Official Position of Reportable Persons and Amount Benefiting Each</th>
<th>Description of Consideration</th>
<th>Total Amount of Activity</th>
</tr>
</thead>
</table>

☐ If more space is needed, check box and attach continuation sheets

PART II - CAMPAIGN CONTRIBUTIONS MADE OR DELIVERED (See instructions on reverse.)

I have reviewed the form and instructions for reporting Campaign Contributions Made or Delivered and:

☐ Part II has been completed and is attached. X I have nothing to report.

VERIFICATION

I have used all reasonable diligence in preparing this Report. I have reviewed the Report and to the best of my knowledge the information contained herein and in the attached schedules 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 (DATE) AT (CITY AND STATE) BY (SIGNATURE OF LOBBYIST)
04-25-2011 San Francisco, CA Must be signed by lobbyist.