

**Name of Regulated Entity:** *Wulff, Hansen & Company*

**Report Period:** *First Quarter of 2025*

**I. CONTRIBUTIONS made to officials of a municipal entity (list by state)**

State	Complete name, title (including any city/county/state or other political subdivision) of municipal entity official	Contributions by each contributor category (i.e., for purposes of this form, dealer, dealer controlled PAC, municipal finance professional, municipal finance professional controlled PAC, non-MFP executive officer, municipal advisor, municipal advisor controlled PAC, municipal advisor professional, municipal advisor professional controlled PAC, and non-MAP executive officer). For each contribution, list contribution amount and contributor category (disclose all applicable categories for each contributor). (For example, \$500 contribution by non-MFP executive officer)
		If any contribution is the subject of an automatic exemption pursuant to Rule G-37(j), list amount of contribution and date of such automatic exemption.

*None*

**II. PAYMENTS made to political parties of states or political subdivisions (list by state)**

State	Complete name (including any city/county/state or other political subdivision) of political party	Payments by each contributor category
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*None*

**III. CONTRIBUTIONS made to bond ballot campaigns (list by state)**

**A. Contributions**

State	Official name of bond ballot campaign and jurisdiction (including city/county/state or other political subdivision) for which municipal securities would be issued and the name of the entity issuing the municipal securities	Contributions, including the specific date the contributions were made, by each contributor category
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*None*

**B. Reimbursement for Contributions**

List below any payments or reimbursements, related to any disclosed bond ballot contribution, received by each dealer, municipal finance professional, non-MFP executive officer, municipal advisor, municipal advisor professional, or non-MAP executive officer from any third party, including the amount paid and the name of the third party making such payments or reimbursements.

*None*

**IV. MUNICIPAL ENTITIES with which the regulated entity has engaged in municipal securities business or municipal advisory business (list by state)**

**A. Municipal Securities Business**

State	Complete name of municipal entity and city/county	Type of municipal securities business (negotiated underwriting, private placement, financial advisor, or remarketing agent)
<i>None</i>		

**B. Municipal Advisory Business**

State	Complete name of municipal entity and city/county	Type of municipal advisory business (advice or solicitation) (and in the case of municipal advisory business engaged in by a municipal advisor third-party solicitor, the name of the third party on behalf of which business was solicited and the nature of the business solicited (municipal securities business, municipal advisory business or investment advisory services))
CA	<i>Marin County Public Financing Authority, San Rafael, Marin</i>	<i>Advice</i>
CA	<i>City of Coalinga, Coalinga, Fresno</i>	<i>Advice</i>
CA	<i>Marin County Public Financing Authority, San Rafael, Marin</i>	<i>Advice</i>
CA	<i>City of Marysville, Marysville, Yuba</i>	<i>Advice</i>
CA	<i>Mid-Peninsula Water District, Belmont, San Mateo</i>	<i>Advice</i>
CA	<i>Oroville Hospital, Oroville, Butte</i>	<i>Advice</i>
CA	<i>Larkspur Marina Financing Authority, Larkspur, Marin</i>	<i>Advice</i>
CA	<i>Tulare Local Healthcare District, Tulare, Tulare</i>	<i>Advice</i>
CA	<i>Community Health Centers of the Central Coast, Santa Maria, Santa Barbara</i>	<i>Advice</i>
CA	<i>Clinicas del Camino Real, Ventura, Ventura</i>	<i>Advice</i>
CA	<i>Woodbridge Irrigation District, Woodbridge, San Joaquin</i>	<i>Advice</i>

**B. Municipal Advisory Business**

State	Complete name of municipal entity and city/county	Type of municipal advisory business (advice or solicitation) (and in the case of municipal advisory business engaged in by a municipal advisor third-party solicitor, the name of the third party on behalf of which business was solicited and the nature of the business solicited (municipal securities business, municipal advisory business or investment advisory services))
CA	<i>City of Ridgecrest, Ridgecrest, Kern</i>	<i>Advice</i>
CA	<i>Valley Health Team, Fresno, Fresno</i>	<i>Advice</i>
CA	<i>City of Larkspur, Larkspur, Marin</i>	<i>Advice</i>
CA	<i>La Maestra, San Diego, San Diego</i>	<i>Advice</i>
CA	<i>City of Chowchilla, Chowchilla, Madera</i>	<i>Advice</i>
CA	<i>County of Marin, San Rafael, Marin</i>	<i>Advice</i>
CA	<i>Marin County Parks, San Rafael, Marin</i>	<i>Advice</i>
CA	<i>City of Jurupa Valley, Jurupa Valley, Riverside</i>	<i>Advice</i>
CA	<i>Indian Wells Valley Groundwater Authority, Ridgecrest, Kern</i>	<i>Advice</i>
CA	<i>ACC Senior Services (Asian Community Center), Sacramento, Sacramento</i>	<i>Advice</i>
CA	<i>El Centro Regional Medical Center, El Centro, Imperial</i>	<i>Advice</i>
CA	<i>Purissima Hills Water District, Los Altos Hills, Santa Clara</i>	<i>Advice</i>
CA	<i>Del Puerto Healthcare District, Patterson, Stanislaus</i>	<i>Advice</i>
CA	<i>SAC Health, San Bernadino, San Bernadino</i>	<i>Advice</i>
CA	<i>Byron Brentwood Knightsen Union Cemetery District, Brentwood, Contra Costa</i>	<i>Advice</i>
CA	<i>City of Benicia, Benicia, Solana</i>	<i>Advice</i>

**C. Ballot-Approved Offerings**

Full name of the municipal entity and issue description of any primary offering resulting from the bond ballot campaign to which each contributor category has made a contribution and the reportable date of selection on which the regulated entity was selected to engage in the municipal securities business or municipal advisory business.

Full Name of Municipal Entity	Full Issue Description	Reportable Date of Selection
<i>None</i>		

## FORM G-37



**Signature:** electronic

**Date:** *Apr 15, 2025*

**Name (must be officer of regulated entity):** *ROBERT PANKRATZ*

**Address:** *100 Smith Ranch Road, San Rafael, CA 94903*

**Phone:** *415-421-8900 x681*

Submit to the Municipal Securities Rulemaking Board a completed form quarterly by due date (specified by the MSRB)