

LOBBYIST QUARTERLY REPORT City of Glendale, California	
Quarter: 1st (File by April 15) 2nd (File by July 15) 3rd (File by October 15)	
4 <sup>th</sup> (File by January 15 of following year)	
Year: 20 20	
SECTION 1: Lobbyist information:	
I am registered with the City as: Individual Lobbyist  Lobbyist Firm	
Name: Lodney V. Khan	
Firm: Khan Consulting Inc.	
Business/mailing Address: 2233 HONOLULU AVE. #209, MONTROSE CA 91020	<u>ر</u>
Phone: (318) 507-1605	
E-mail: KHAN CONSULTING & AOL. COM	
SECTION 2: Client information for whom you are lobbying (add extra pages if necessary):	
Name: NONE DURING THIS QUARTER	
Address:	
Phone:	
E-mail:	
Nature of Business:	
Description of Project(s) or Legislation lobbying for:	
Type here	
•	



SECTION 3: Information	relating to City	<u>of Glendale O</u>	<u> Micials contacte</u>	ed or to be contac	<u>:ted:</u>	
Name and Title of Officia	1: <u>\</u> E	NE	n, + da da		<del></del>	
Date contacted or will co correspondence):	ntact (includes, l	but is not limit	ed to in person	meetings, remot	e meetings and	
Check here if you d	o not yet know v	vhich City of G	lendale Official	you will be conta	cting.	
Check here and atta				vities for more th	an one client.	
SECTION 4: Financial Inf List the amount received		d from each cl	ient:			
Date received/to	Amount receive	ed /to be	If non-monetary compensation, provide			
be received	received		description and fair market value.			
NONG						
Total compensation rece purposes – please provic						
Client Name	\$0-\$500	\$501- \$1,000	\$1,001- \$10,000	\$10,001- \$100,000	Over \$100,000	
		\$1,000	310,000	3100,000	\$100,000	
		. 121	16			
		Not				
		1				
			1			



each client:		(		
Client Name:	NON			
Description of Project(s) or Legislation lobb	oying for:			, , , , , , , , , , , , , , , , , , , ,
Name of City Official(s) contacted and num	ber of times	contacted:		
Name of City Official	1 contact	2-5 contacts	6-10 contacts	11+ contacts
		/		
N. Colin Official	1	<i>(</i>		
Name of City Official	1 contact	2←5 contacts	6-10 contacts	11+ contacts
	10P			
Name of City Official	1 contact	2-5 contacts	6-10 contacts	111
Name of City Official		2-5 Contacts	6-10 contacts	11+ contacts
		<u> </u>	I	l
Name of City Official	1 contact	2-5 contacts	6-10 contacts	11+ contacts
Check here and attach additional sheet This form may be duplicated and attached			vities for more th	nan one client.

## **SECTION 6: Lobbyist activity expenses:**

Please list payments made by you, during this reporting period, which directly benefitted any City Official or City Official's immediate family or domestic partner. Activity expenses do not include campaign contributions, however, they do include gifts, salaries and other forms of compensation to the City Official.



Activity Expense paid/incurred by Lobbyist to City Official — please list dollar amount or fair market value.	Description of activity (e.g. gift, salary, loan forgiveness, passes, etc.)	
MIONE	Gold, silver, jewels	
	by Lobbyist to City Official – please list dollar amount or fair	

\_\_\_\_ Check here and attach additional sheets if reporting lobbying activities for more than one client. This form may be duplicated and attached as additional sheets.

I declare under penalty of perjury, under the laws of the State of California, that the information provided herein is true and correct.

Executed on 10 8 20 at Glendale California

Signature

Rodney V. Khan

Printed Name

PRINCIPA



SECTION 5: Information	LEISTHIN TO CITA D	i dieugaie Off	iciais contacted o	ir to be contacted	li	
Name and Title of Officia	"-Non	ting I	D PEPC	PI	NH	
Date contacted or will co correspondence):	ntact (includes, b	ut is not limite	d to in person me	etings, remote m	neetings and	
Check here if you d	o not yet know w	hich City of Gle	endale Official you	ı will be contactir	ig:	
Check here and atta				es for more than	one client.	
SECTION 4: Financial Inf	ormation					
List the amount received		l from each clie	ent:			
Date received/to	Amount receive	d/to be	If non-monetary compensation, provide			
be received	received		description and fair market value.			
:						
NOTHING to REPORT						
Total compensation rece	eived or promised	l from each cli	ent during this re	porting period fo	or lobbying	
purposes – please provid						
		<u> </u>				
Client Name	\$0-\$500	\$501-	\$1,001-	\$10,001-	Over	
		\$1,000	\$10,000	\$100,000	\$100,000	
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