

LOBBYIST QUARTERLY REPORT	City of Glendale, California
Quarter:1 <sup>st</sup> (File by April 15)2 <sup>nd</sup> (File by July 15	3 <sup>rd</sup> (File by October 15)
Year: 20	
SECTION 1: Lobbyist information:	
I am registered with the City as: Individual Lobbyist	Lobbyist Firm
Name: Lodney V. Than	
Firm: Khan Constituting Inc	*
Business/mailing Address: Mont	ROSE, CA 9102
Phone: (8(8) 216 -5315	,
E-mail: KHANCONSULTING@ GO	L. COM
SECTION 2: Client information for whom you are lobbying (add	l extra pages if necessary):
Name:	
Address:	
Phone:	
E-mail:	
Nature of Business:	
Description of Project(s) or Legislation lobbying for:	A



## **SECTION 3: Financial Information:**

List the amount received or to be received from each client:

Date received/to be received	Amount received /to be received	If non-monetary compensation, provide description and fair market value.

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Date received/to be received	Amount received /to be received	If non-monetary compensation, provide description and fair market value.

<u>Total compensation received or promised from each client during this reporting period for lobbying purposes – please provide the name of each client and check the appropriate box for the range:</u>

Client Name	\$0-\$500	\$501- \$1,000	\$1,001- \$10,000	\$10,001- \$100,000	Over \$100,000



<b>SECTION 4:</b>	Information re	elating to City of	Glendale Officials co	ntacted or to be contacted during this
reporting p	eriod:		11/	
			$\mathbb{N} \setminus \mathbb{H}$	
Client:				
Name and T	itle of Official o	ontacted or to b	l V /	
Name and i	ttle of Official C	ontacted of to b	e contacted:	
Date(s) con	tacted or will co	ontact (includes,	but is not limited to in	n person meetings, remote meetings
and corresp	ondence):	MANAGEMENT OF THE STATE OF THE		
	-			
		r anticipated cor		
1 contact	2-5 contacts	6-10 contacts	11+ contacts	
		L		
Client:				
- Annual Control of the Control of t			/	
Name and T	itle of Official c	ontacted or to b	contacted:	
				n person meetings, remote meetings
and corresp	ondence):			
Total numb	er of contacts o	r anticipated cor	tarts.	
1 contact	T	6-10 contacts	11+ contacts	
1 contact	2 3 contacts	O 10 contacts	111 contacts	
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Client:				
Name and T	itle of Official c	ontacted or to be	e contacted:	
		ontact (includes, i	out is not limited to ir	n person meetings, remote meetings
and corresp	ondence):			
Total numb	er of contacts o	r anticipated con	tacts:	
1 contact	2-5 contacts	6-10 contacts	11+ contacts	
			International Control of the Control	



Client:	X	11/		
Name and T	itle of Official c	ontacted or to be	e contacted:	
Date(s) cont and corresp		ntact (includes,	but is not limited	to in person meetings, remote meetings
Total numbe	er of contacts o	r anticipated cor	ntacts:	
1 contact	2-5 contacts	6-10 contacts	11+ contacts	
		_/		
Check h	ere if you do no	t yet know whic	h City of Glendal	e Official you will be contacting.
	ere and attach a		if necessary. Pa	ges from this form may be duplicated and

[Remainder of page intentionally left blank]



## **SECTION 5: Lobbyist activity expenses:**

Please list payments made by you,	during this reporting period, which	n directly benefitted any City	
Official or City Official's immediate	family or domestic partner. Activi	ty expenses do not include	
campaign contributions, however,	they do include gifts, salaries and o	other forms of compensation to the	
City Official.	\		
Client:	JA		
Name of 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.)	
John JohnJohn JohnJohn JohnJohn JohnJohn JohnJohn JohnJohn JohnJohn JohnJohn			
Client:			
Name of 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.)	
Client:			
Name of 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.)	



[ ] Check here and attach additional sheets if reporting lobbying activities for more than one client. Pages from 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.

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Signature

Printed Name

Title/Position