



LOBBYIST QUARTERLY REPORT

City of Glendale, California

Quarter: ___1st (File by April 15) ___2nd (File by July 15) ___3rd (File by October 15)
 ___4th (File by January 15 of following year)

Year: 20___

SECTION 1: Lobbyist information:

I am registered with the City as: ___ Individual Lobbyist ___ Lobbyist Firm

Name: _____

Firm: _____

Business/mailing Address:

Phone: _____

E-mail: _____

SECTION 2: Client information for whom you are lobbying (add extra pages if necessary):

Name: _____

Address: _____

Phone: _____

E-mail: _____

Nature of Business: _____

Description of Project(s) or Legislation lobbying for:



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.

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.

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:

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



SECTION 4: Information relating to City of Glendale Officials contacted or to be contacted during this reporting period:

Client: _____

Name and Title of Official contacted or to be contacted:

Date(s) contacted or will contact (includes, but is not limited to in person meetings, remote meetings and correspondence): _____

Total number of contacts or anticipated contacts:

1 contact	2-5 contacts	6-10 contacts	11+ contacts

Client: _____

Name and Title of Official contacted or to be contacted:

Date(s) contacted or will contact (includes, but is not limited to in person meetings, remote meetings and correspondence): _____

Total number of contacts or anticipated contacts:

1 contact	2-5 contacts	6-10 contacts	11+ contacts

Client: _____

Name and Title of Official contacted or to be contacted:

Date(s) contacted or will contact (includes, but is not limited to in person meetings, remote meetings and correspondence): _____

Total number of contacts or anticipated contacts:

1 contact	2-5 contacts	6-10 contacts	11+ contacts



Client: _____

Name and Title of Official contacted or to be contacted:

Date(s) contacted or will contact (includes, but is not limited to in person meetings, remote meetings and correspondence): _____

Total number of contacts or anticipated contacts:

1 contact	2-5 contacts	6-10 contacts	11+ contacts

Check here if you do not yet know which City of Glendale Official you will be contacting.

Check here and attach additional sheets if necessary. Pages from this form may be duplicated and attached as additional sheets.

[Remainder of page intentionally left blank]



SECTION 5: 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.

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.)

Client: _____

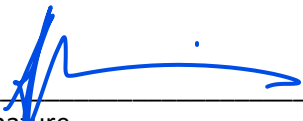
Name of City Official	Activity Expense paid/incurred by Lobbyist to City Official – please list dollar amount or fair market value.	Description of activity (e.g. gift, salary, loan forgiveness, passes, etc.)



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.

Executed on _____, at _____, California.



Signature

Printed Name

Title/Position