

## LOBBYIST QUARTERLY REPORT City of Glendale, California Quarter: \_\_\_1<sup>st</sup> (File by April 15) \_\_\_\_3<sup>rd</sup> (File by October 15) ✓ 4<sup>th</sup> (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: SECTION 2: Client information for whom you are lobbying (add extra pages if necessary): Name: \_\_\_\_\_ 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:	
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Date received/to be	Amount received /to be	If non-monetary compensation, provide
received	received	description and fair market value.
ist the amount received	d or to be received from each c	lient:
Date received/to be	Amount received /to be	
Date received/to be received	Amount received /to be received	If non-monetary compensation, provide description and fair market value.
		If non-monetary compensation, provide

<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



## <u>SECTION 4: Information relating to City of Glendale Officials contacted or to be contacted during this reporting period:</u>

Client:				
Name and T	itle of Official c	ontacted or to be	e contacted:	
			but is not limited t	o in person meetings, remote meetings
Total numbe	er of contacts o	r anticipated con	itacts:	
		6-10 contacts		
Client:				
		ontacted or to be		
		•	but is not limited t	o in person meetings, remote meetings
Total numbe	er of contacts o	r anticipated con	tacts:	
1 contact	2-5 contacts	6-10 contacts	11+ contacts	
				I
Client:				
Name and T	itle of Official c	ontacted or to be	e contacted:	
		•	but is not limited t	o in person meetings, remote meetings
		r anticipated con 6-10 contacts		
1 contact	2 3 001114003	0 10 contacts	II. Contacts	



Client:			
Name and Title of Of	ficial contacted or to b	e contacted:	
• •	will contact (includes,		to in person meetings, remote meetings
Total number of cont	acts or anticipated cor	ntacts:	_
1 contact 2-5 cont	tacts 6-10 contacts	11+ contacts	
		•	•
,	•	,	Official you will be contacting.
[_] Check here and at attached as additional		if necessary. Page	es 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 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.

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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.)



<del></del> -		eporting lobbying activities for more than one clier ached as additional sheets.
I declare under penalty of provided herein is true a		ws of the State of California, that the information
Executed on	, at	, California.
Signature		
Printed Name		
 Title/Position		