

CITY CLERK'S OFFICE Legislative Services

# LOBBYIST QUARTERLY REPORT

The Lobbyist Quarterly Report is required for lobbying activities (see Lobbyist Types and thresholds below) for <u>each</u> Client during the prior calendar quarter.

Complete the following information and submit your Lobbyist Quarterly Report no later than the due dates specified below. There is no fee due with quarterly reports. However, if the report is not filed by the due date, it will be subject to a \$10/day delinquency fee per City Council Resolution No. 06-26. For questions, please contact the City Clerk's Office at 949-724-6205 or email at <u>clerk@cityofirvine.org</u>.

#### **SELECT APPLICABLE REPORTING PERIOD:**

🗌 January 1 - March 31	DUE APRIL 15	🗌 April 1 - June 30	DUE JULY 15
July 1 - September 30	DUE OCTOBER 15	October 1 - December 31	DUE JANUARY 15
AMENDMENT - For Re	porting Period:		

**LOBBYIST TYPE:** (See Irvine Municipal Code Section 1-7-102 for the definition of lobbyist)

**INDIVIDUAL** - entitled to receive \$1,000 or more in economic consideration in a calendar month

**IN-HOUSE** - duties as a salaried employee to influence any proposed or pending municipal question of the City

**EXPENDITURE** - spends \$5,000 or more in economic consideration in a calendar year

### **SECTION 1 - REGISTRANT LOBBYIST INFORMATION**

NAME OF REGISTRANT LOBBYIST (If individual,	, include First Name, Last Name, and Middle Initial)
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BUSINESS ADDRESS			BUSINESS PHONE
CITY	STATE	ZIP	BUSINESS EMAIL
NATURE OF BUSINESS			
NAME(S) AND POSITION(S) OF EACH CITY OF	FICIAL (OR CITY O	FFICIAL'S RELAT	IVE) WHO IS EMPLOYED BY THE REGISTRANT
IF REGISTRANT (OR REGISTRANT'S EMPLOYE	E) IS A FORMER C	TTY OFFICIAL/EI	MPLOYEE, LIST POSITION(S) HELD DURING THE
PAST YEAR			

## SECTION 2 - REGISTRANT'S CLIENT INFORMATION

riovide information for <u>eden</u> new eneme of re	port any changes	for <u>each</u> existing	Client since your last f	iled report.
CLIENT NAME			<b>NEW</b> CLIENT	EXISTING CLIENT
1.			Date Qualified:	
ADDRESS			PHONE	
CITY	STATE	ZIP	NATURE OF BUSINESS	
COMPLETE THE FOLLOWING SECTION TO REPO	I RT CHANGES IN IN	FORMATION -OR	R- CHECK: 🕅 NO CHA	NGES TO REPORT
NAME OF PERSON, OTHER THAN CLIENT, ON WHO	DSE BEHALF THE REG	GISTRANT HAS BE	EN ENGAGED BY THE CLI	ENT TO LOBBY
NAME(S) OF PERSON, OTHER THAN CLIENT, WHC	IS KNOWN BY THE	REGISTRANT TO C	CONTRIBUTE FINANCIALL	Y TO THE COMPENSATION
OF THE REGISTRANT, OR PLANS, SUPERVISES, OR	CONTROLS REGISTR	ANT'S LOBBYING	ACTIVITIES ON BEHALF O	F THE CLIENT
NAME OF LOBBYING FIRM FOR WHICH THE REGIS	TRANT IS AN AGENT	OR EMPLOYEE W	ITH RESPECT TO THE CLIE	ENT
NAME(S) OF EMPLOYEE OR AGENT OF THE REGIST	FRANT WHO HAS AC	TED OR EXPECTS	TO ACT AS A LOBBYIST O	N BEHALF OF THE CLIENT
DESCRIBE ALL MUNICIPAL QUESTIONS ON WHICH				PRECEDING THE FILING OF
THE REGISTRATION OR FORSEEABLY WILL LOBBY	(as defined by Irvine	e Municipal Code	Section 1-7-102)	
CLIENT NAME				
2.			Date Qualified:	<b>EXISTING</b> CLIENT
ADDRESS			PHONE	
CITY	STATE	ZIP		
			NATURE OF BUSINESS	
		ZIF	NATURE OF BUSINESS	
COMPLETE THE FOLLOWING SECTION TO REPO	RT CHANGES IN IN	FORMATION -OF	R- CHECK: 🔲 <b>NO CHA</b>	
COMPLETE THE FOLLOWING SECTION TO REPONATE OF PERSON, OTHER THAN CLIENT, ON WHO	RT CHANGES IN IN	FORMATION -OF	R- CHECK: 🔲 <b>NO CHA</b>	
NAME OF PERSON, OTHER THAN CLIENT, ON WHO	RT CHANGES IN IN DSE BEHALF THE REC	FORMATION -OR GISTRANT HAS BE	R- CHECK: D NO CHA	ENT TO LOBBY
	RT CHANGES IN IN DSE BEHALF THE REC	FORMATION -OR GISTRANT HAS BEI REGISTRANT TO (	P- CHECK: DOCHA	ENT TO LOBBY
NAME OF PERSON, OTHER THAN CLIENT, ON WHO NAME(S) OF PERSON, OTHER THAN CLIENT, WHO	RT CHANGES IN IN DSE BEHALF THE REC	FORMATION -OR GISTRANT HAS BEI REGISTRANT TO (	P- CHECK: DOCHA	ENT TO LOBBY
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NAME OF PERSON, OTHER THAN CLIENT, ON WHO NAME(S) OF PERSON, OTHER THAN CLIENT, WHO OF THE REGISTRANT, OR PLANS, SUPERVISES, OR NAME OF LOBBYING FIRM FOR WHICH THE REGIS	ORT CHANGES IN IN DSE BEHALF THE REC DIS KNOWN BY THE CONTROLS REGISTR	FORMATION -OR GISTRANT HAS BE REGISTRANT TO C ANT'S LOBBYING	P- CHECK: <b>NO CHA</b> EN ENGAGED BY THE CLII CONTRIBUTE FINANCIALL ACTIVITIES ON BEHALF O	ENT TO LOBBY
NAME OF PERSON, OTHER THAN CLIENT, ON WHO NAME(S) OF PERSON, OTHER THAN CLIENT, WHO OF THE REGISTRANT, OR PLANS, SUPERVISES, OR NAME OF LOBBYING FIRM FOR WHICH THE REGIS	ORT CHANGES IN IN DSE BEHALF THE REC DIS KNOWN BY THE CONTROLS REGISTR	FORMATION -OR GISTRANT HAS BE REGISTRANT TO C ANT'S LOBBYING	P- CHECK: <b>NO CHA</b> EN ENGAGED BY THE CLII CONTRIBUTE FINANCIALL ACTIVITIES ON BEHALF O	ENT TO LOBBY
NAME OF PERSON, OTHER THAN CLIENT, ON WHO NAME(S) OF PERSON, OTHER THAN CLIENT, WHO OF THE REGISTRANT, OR PLANS, SUPERVISES, OR NAME OF LOBBYING FIRM FOR WHICH THE REGIS NAME(S) OF EMPLOYEE OR AGENT OF THE REGIST	ORT CHANGES IN IN DSE BEHALF THE REC DIS KNOWN BY THE CONTROLS REGISTR TRANT IS AN AGENT	FORMATION -OR GISTRANT HAS BEI REGISTRANT TO C ANT'S LOBBYING OR EMPLOYEE W	P- CHECK: NO CHA EN ENGAGED BY THE CLI CONTRIBUTE FINANCIALL ACTIVITIES ON BEHALF O ITH RESPECT TO THE CLIE	ENT TO LOBBY Y TO THE COMPENSATION F THE CLIENT ENT IN BEHALF OF THE CLIENT
NAME OF PERSON, OTHER THAN CLIENT, ON WHO NAME(S) OF PERSON, OTHER THAN CLIENT, WHO OF THE REGISTRANT, OR PLANS, SUPERVISES, OR NAME OF LOBBYING FIRM FOR WHICH THE REGIS	RT CHANGES IN IN DSE BEHALF THE REC DIS KNOWN BY THE CONTROLS REGISTR TRANT IS AN AGENT TRANT WHO HAS AC	FORMATION -OR GISTRANT HAS BEI REGISTRANT TO C ANT'S LOBBYING OR EMPLOYEE W	P- CHECK: NO CHA EN ENGAGED BY THE CLI CONTRIBUTE FINANCIALL ACTIVITIES ON BEHALF O ITH RESPECT TO THE CLIE TO ACT AS A LOBBYIST O THE CLIENT IN THE YEAR	ENT TO LOBBY Y TO THE COMPENSATION F THE CLIENT ENT IN BEHALF OF THE CLIENT

### SECTION 2 - REGISTRANT'S CLIENT INFORMATION (Continued)

Provide information for <u>each</u> new Client or re	port any changes	for <u>each</u> existing	Client since your las	t filed report.
CLIENT NAME			<b>NEW</b> CLIENT	<b>EXISTING</b> CLIENT
3.			Date Qualified:	
ADDRESS			PHONE	
CITY	STATE	ZIP	NATURE OF BUSINES	SS
COMPLETE THE FOLLOWING SECTION TO REPO	DRT CHANGES IN IN	FORMATION -OI	R- CHECK: 🔲 NO CH	ANGES TO REPORT
NAME OF PERSON, OTHER THAN CLIENT, ON WHO	OSE BEHALF THE RE	GISTRANT HAS BE	EN ENGAGED BY THE C	LIENT TO LOBBY
NAME(S) OF PERSON, OTHER THAN CLIENT, WHO				
OF THE REGISTRANT, OR PLANS, SUPERVISES, OR	CONTROLS REGISTR	ANT'S LOBBYING	ACTIVITIES ON BEHALF	OF THE CLIENT
NAME OF LOBBYING FIRM FOR WHICH THE REGIS	TRANT IS AN AGENT	OR EMPLOYEE W	/ITH RESPECT TO THE C	LIENT
NAME(S) OF EMPLOYEE OR AGENT OF THE REGIS	TRANT WHO HAS AC	TED OR EXPECTS	TO ACT AS A LOBBYIST	ON BEHALF OF THE CLIENT
DESCRIBE ALL MUNICIPAL QUESTIONS ON WHICH				AR PRECEDING THE FILING OF
THE REGISTRATION OR FORSEEABLY WILL LOBBY	(as defined by Irving	e Municipal Code	Section 1-7-102)	
			1	
CLIENT NAME			Date Qualified:	<b>EXISTING</b> CLIENT
4.			Date Qualified:	EXISTING CLIENT
				EXISTING CLIENT
<b>4.</b> ADDRESS		710	Date Qualified:	
4.	STATE	ZIP	Date Qualified:	
<b>4.</b> ADDRESS CITY			Date Qualified: PHONE NATURE OF BUSINES	
<b>4.</b> ADDRESS         CITY         COMPLETE THE FOLLOWING SECTION TO REPORT	DRT CHANGES IN IN	FORMATION -OI	Date Qualified: PHONE NATURE OF BUSINES R- CHECK: <b>NO CH</b>	55 IANGES TO REPORT
<b>4.</b> ADDRESS CITY	DRT CHANGES IN IN	FORMATION -OI	Date Qualified: PHONE NATURE OF BUSINES R- CHECK: <b>NO CH</b>	55 IANGES TO REPORT
<b>4.</b> ADDRESS         CITY <i>COMPLETE THE FOLLOWING SECTION TO REPO</i> NAME OF PERSON, OTHER THAN CLIENT, ON WHO	DRT CHANGES IN IN OSE BEHALF THE REG	FORMATION -OI	Date Qualified: PHONE NATURE OF BUSINES R- CHECK: <b>NO CH</b> EN ENGAGED BY THE C	55 IANGES TO REPORT ILIENT TO LOBBY
<b>4.</b> ADDRESS         CITY <i>COMPLETE THE FOLLOWING SECTION TO REPO</i> NAME OF PERSON, OTHER THAN CLIENT, ON WHO         NAME(S) OF PERSON, OTHER THAN CLIENT, WHO	DRT CHANGES IN IN DSE BEHALF THE REG	FORMATION -OI GISTRANT HAS BE REGISTRANT TO 0	Date Qualified: PHONE NATURE OF BUSINES R- CHECK: <b>NO CH</b> EN ENGAGED BY THE C	SS IANGES TO REPORT ILIENT TO LOBBY
<b>4.</b> ADDRESS         CITY <i>COMPLETE THE FOLLOWING SECTION TO REPO</i> NAME OF PERSON, OTHER THAN CLIENT, ON WHO	DRT CHANGES IN IN DSE BEHALF THE REG	FORMATION -OI GISTRANT HAS BE REGISTRANT TO 0	Date Qualified: PHONE NATURE OF BUSINES R- CHECK: <b>NO CH</b> EN ENGAGED BY THE C	SS IANGES TO REPORT ILIENT TO LOBBY
<b>4.</b> ADDRESS         CITY <i>COMPLETE THE FOLLOWING SECTION TO REPO</i> NAME OF PERSON, OTHER THAN CLIENT, ON WHO         NAME(S) OF PERSON, OTHER THAN CLIENT, WHO         OF THE REGISTRANT, OR PLANS, SUPERVISES, OR	DRT CHANGES IN IN OSE BEHALF THE REG O IS KNOWN BY THE CONTROLS REGISTR	FORMATION -OI GISTRANT HAS BE REGISTRANT TO G RANT'S LOBBYING	Date Qualified: PHONE NATURE OF BUSINES R- CHECK: <b>NO CH</b> EN ENGAGED BY THE C CONTRIBUTE FINANCIA ACTIVITIES ON BEHALF	SS ANGES TO REPORT LIENT TO LOBBY
<b>4.</b> ADDRESS         CITY <i>COMPLETE THE FOLLOWING SECTION TO REPO</i> NAME OF PERSON, OTHER THAN CLIENT, ON WHO         NAME(S) OF PERSON, OTHER THAN CLIENT, WHO	DRT CHANGES IN IN OSE BEHALF THE REG O IS KNOWN BY THE CONTROLS REGISTR	FORMATION -OI GISTRANT HAS BE REGISTRANT TO G RANT'S LOBBYING	Date Qualified: PHONE NATURE OF BUSINES R- CHECK: <b>NO CH</b> EN ENGAGED BY THE C CONTRIBUTE FINANCIA ACTIVITIES ON BEHALF	SS ANGES TO REPORT LIENT TO LOBBY
4. ADDRESS CITY COMPLETE THE FOLLOWING SECTION TO REPO NAME OF PERSON, OTHER THAN CLIENT, ON WHO NAME(S) OF PERSON, OTHER THAN CLIENT, WHO OF THE REGISTRANT, OR PLANS, SUPERVISES, OR NAME OF LOBBYING FIRM FOR WHICH THE REGIS	DRT CHANGES IN IN DSE BEHALF THE REG D IS KNOWN BY THE CONTROLS REGISTR	FORMATION -OF	Date Qualified: PHONE NATURE OF BUSINES R- CHECK: <b>NO CH</b> EN ENGAGED BY THE C CONTRIBUTE FINANCIA ACTIVITIES ON BEHALF	SS ANGES TO REPORT LIENT TO LOBBY LLLY TO THE COMPENSATION OF THE CLIENT LIENT
<b>4.</b> ADDRESS         CITY <i>COMPLETE THE FOLLOWING SECTION TO REPO</i> NAME OF PERSON, OTHER THAN CLIENT, ON WHO         NAME(S) OF PERSON, OTHER THAN CLIENT, WHO         OF THE REGISTRANT, OR PLANS, SUPERVISES, OR	DRT CHANGES IN IN DSE BEHALF THE REG D IS KNOWN BY THE CONTROLS REGISTR	FORMATION -OF	Date Qualified: PHONE NATURE OF BUSINES R- CHECK: <b>NO CH</b> EN ENGAGED BY THE C CONTRIBUTE FINANCIA ACTIVITIES ON BEHALF	SS ANGES TO REPORT LIENT TO LOBBY LLLY TO THE COMPENSATION OF THE CLIENT LIENT
4. ADDRESS CITY COMPLETE THE FOLLOWING SECTION TO REPORNAME OF PERSON, OTHER THAN CLIENT, ON WHON NAME OF PERSON, OTHER THAN CLIENT, WHON OF THE REGISTRANT, OR PLANS, SUPERVISES, OR NAME OF LOBBYING FIRM FOR WHICH THE REGIST	DRT CHANGES IN IN DSE BEHALF THE REG D IS KNOWN BY THE CONTROLS REGISTR TRANT IS AN AGENT	FORMATION -OI GISTRANT HAS BE REGISTRANT TO G RANT'S LOBBYING FOR EMPLOYEE W	Date Qualified: PHONE NATURE OF BUSINES R- CHECK: <b>NO CH</b> EN ENGAGED BY THE C CONTRIBUTE FINANCIA ACTIVITIES ON BEHALF /ITH RESPECT TO THE C TO ACT AS A LOBBYIST	SS ANGES TO REPORT LIENT TO LOBBY LLLY TO THE COMPENSATION OF THE CLIENT LIENT CON BEHALF OF THE CLIENT
4. ADDRESS CITY COMPLETE THE FOLLOWING SECTION TO REPO NAME OF PERSON, OTHER THAN CLIENT, ON WHO NAME(S) OF PERSON, OTHER THAN CLIENT, WHO OF THE REGISTRANT, OR PLANS, SUPERVISES, OR NAME OF LOBBYING FIRM FOR WHICH THE REGIS	DRT CHANGES IN IN DSE BEHALF THE REG D IS KNOWN BY THE CONTROLS REGISTR TRANT IS AN AGENT TRANT WHO HAS AC	FORMATION -OF GISTRANT HAS BE REGISTRANT HAS BE REGISTRANT TO G ANT'S LOBBYING OR EMPLOYEE W TOR EMPLOYEE W TED OR EXPECTS	Date Qualified: PHONE NATURE OF BUSINES R- CHECK: NO CH EN ENGAGED BY THE C CONTRIBUTE FINANCIA ACTIVITIES ON BEHALF /ITH RESPECT TO THE C TO ACT AS A LOBBYIST THE CLIENT IN THE YE/	SS ANGES TO REPORT LIENT TO LOBBY LLLY TO THE COMPENSATION OF THE CLIENT LIENT CON BEHALF OF THE CLIENT

### SECTION 3 - LOBBYING ACTIVITIES

Lobbying activities must be reported for each Client for which compensation was received during the applicable calendar
quarter. Identify the Client represented. List all issues, including specific municipal questions and/or legislative proposals and
other proposed, pending, or completed official actions that occurred during this reporting period.

#### NAME OF CLIENT ON WHOSE BEHALF LOBBYING WAS CONDUCTED

1.

COMPLETE THE FOLLOWING SECTION TO REPORT LOBBYING ACTIVIES -OR- CHECK: **NO ACTIVITY FOR THIS QUARTER** NAME(S) OF EMPLOYEE OR AGENT OF THE REGISTRANT WHO ACTED AS LOBBYISTS ON BEHALF OF THE CLIENT

DESCRIPTION OF ISSUE - MUNICIPAL QUESTIONS AND/OR LEGISLATIVE PROPOSALS

DATE AND TIME OF CONTACT	CITY OFFICIAL CONTACTED	TITLE OF CITY OFFICIAL

MEANS AND MEDIUM OF LOBBYING ACTIVITY (e.g. meeting, text message, email, video conference)

#### COMMITTEE CONTRIBUTIONS (If applicable)

Complete the table below if an itemization of any contributions totaling \$100 or more was made by the lobbyist to any of the following committees: (a) a candidate's election committee; (b) a candidate-controlled ballot measure committee; (c) a candidate's professional expense committee; or (d) a committee primarily formed to support or oppose one or more candidates.

DATE OF CONTRIBUTION	AMOUNT	COMMITTEE NAME

### FOR EXPENDITURE LOBBYIST ONLY

Provide the following information regarding each expenditure on activities designed to solicit or urge other persons to communicate directly with any City official in order to attempt to influence any proposed or pending municipal question of the City.

DATE OF EXPENDITURE	AMOUNT	SUBJECT

SECTION 3 - LOB	BYING ACTIV	<b>/ITIES</b> (Continued)
		for which compensation was received during the applicable calenda
		including specific municipal questions and/or legislative proposals and
other proposed, pending, or co	mpleted official actions	that occurred during this reporting period.
NAME OF CLIENT ON WHOSE B	EHALF LOBBYING WAS (	CONDUCTED
2.		
COMPLETE THE FOLLOWING SEC	TION TO REPORT LOBBY	ING ACTIVIES -OR- CHECK: 🔲 NO ACTIVITY FOR THIS QUARTER
NAME(S) OF EMPLOYEE OR AGENT	OF THE REGISTRANT WHO	O ACTED AS LOBBYISTS ON BEHALF OF THE CLIENT
DESCRIPTION OF ISSUE - MUNICIPA	AL QUESTIONS AND/OR LE	EGISLATIVE PROPOSALS
DATE AND TIME OF CONTACT	CITY OFFICIAL CO	ONTACTED TITLE OF CITY OFFICIAL
	IG ACTIVITY (e.g. meeting	text message, email, video conference)
	id Activity (e.g. meeting,	
COMMITTEE CONTRIBUTIONS (If ap	•	tions totaling \$100 or more use mode by the John ist to any of the followin
		tions totaling \$100 or more was made by the lobbyist to any of the followin
	ction committee; (b) a ca	ndidate-controlled ballot measure committee; (c) a candidate's professiona
expense committee; or (d) a comm		ndidate-controlled ballot measure committee; (c) a candidate's professiona support or oppose one or more candidates.
expense committee; or (d) a comm DATE OF CONTRIBUTION		
·	nittee primarily formed to	support or oppose one or more candidates.
·	nittee primarily formed to	support or oppose one or more candidates.
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·	nittee primarily formed to	support or oppose one or more candidates.
	nittee primarily formed to	support or oppose one or more candidates.
DATE OF CONTRIBUTION	nittee primarily formed to a	support or oppose one or more candidates.
DATE OF CONTRIBUTION	AMOUNT	support or oppose one or more candidates.  COMMITTEE NAME
DATE OF CONTRIBUTION	NILY n regarding each expendi	support or oppose one or more candidates.
DATE OF CONTRIBUTION	NILY n regarding each expendi	support or oppose one or more candidates. COMMITTEE NAME
DATE OF CONTRIBUTION FOR EXPENDITURE LOBBYIST OF Provide the following information directly with any City official in orce	AMOUNT AMOUNT NLY n regarding each expendi ler to attempt to influence	support or oppose one or more candidates. COMMITTEE NAME COMMITTEE NAME ture on activities designed to solicit or urge other persons to communicat any proposed or pending municipal question of the City.
DATE OF CONTRIBUTION FOR EXPENDITURE LOBBYIST OF Provide the following information directly with any City official in orce	AMOUNT AMOUNT NLY n regarding each expendi ler to attempt to influence	support or oppose one or more candidates. COMMITTEE NAME COMMITTEE NAME ture on activities designed to solicit or urge other persons to communicat any proposed or pending municipal question of the City.
DATE OF CONTRIBUTION FOR EXPENDITURE LOBBYIST OF Provide the following information directly with any City official in orce	AMOUNT AMOUNT NLY n regarding each expendi ler to attempt to influence	support or oppose one or more candidates. COMMITTEE NAME COMMITTEE NAME ture on activities designed to solicit or urge other persons to communicat any proposed or pending municipal question of the City.
DATE OF CONTRIBUTION FOR EXPENDITURE LOBBYIST OF Provide the following informatior directly with any City official in orce	AMOUNT AMOUNT NLY n regarding each expendi ler to attempt to influence	support or oppose one or more candidates. COMMITTEE NAME COMMITTEE NAME ture on activities designed to solicit or urge other persons to communicat any proposed or pending municipal question of the City.

SECTION 3 - LOB	BYING ACTIV	ITIES (Continued)
Lobbying activities must be re	eported for <u>each</u> Client	for which compensation was received during the applicable calendar
		including specific municipal questions and/or legislative proposals and
other proposed, pending, or co	ompleted official actions	that occurred during this reporting period.
NAME OF CLIENT ON WHOSE B	EHALF LOBBYING WAS	CONDUCTED
3.		
COMPLETE THE FOLLOWING SEC	TION TO REPORT LOBBY	NG ACTIVIES -OR- CHECK: ON ACTIVITY FOR THIS QUARTER
NAME(S) OF EMPLOYEE OR AGENT	F OF THE REGISTRANT WHO	D ACTED AS LOBBYISTS ON BEHALF OF THE CLIENT
DESCRIPTION OF ISSUE - MUNICIP	AL QUESTIONS AND/OR LE	GISLATIVE PROPOSALS
DATE AND TIME OF CONTACT	CITY OFFICIAL CO	ONTACTED TITLE OF CITY OFFICIAL
MEANS AND MEDIUM OF LOBBYIN	NG ACTIVITY (e.g. meeting,	text message, email, video conference)
COMMITTEE CONTRIBUTIONS (If a	pplicable)	
		tions totaling \$100 or more was made by the lobbyist to any of the following
		ndidate-controlled ballot measure committee; (c) a candidate's professional support or oppose one or more candidates.
DATE OF CONTRIBUTION	AMOUNT	COMMITTEE NAME
FOR EXPENDITURE LOBBYIST O		
		ture on activities designed to solicit or urge other persons to communicate
5	5 5 1	any proposed or pending municipal question of the City.
DATE OF EXPENDITURE	AMOUNT	SUBJECT

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SECTION 3 - LOB		
, .		for which compensation was received during the applicable calenc including specific municipal questions and/or legislative proposals a
		that occurred during this reporting period.
NAME OF CLIENT ON WHOSE BE	EHALF LOBBYING WAS O	CONDUCTED
4.		
COMPLETE THE FOLLOWING SEC	TION TO REPORT LOBBYI	ING ACTIVIES -OR- CHECK: INO ACTIVITY FOR THIS QUARTER
NAME(S) OF EMPLOYEE OR AGENT	OF THE REGISTRANT WHO	D ACTED AS LOBBYISTS ON BEHALF OF THE CLIENT
DESCRIPTION OF ISSUE - MUNICIPA	AL QUESTIONS AND/OR LE	EGISLATIVE PROPOSALS
DATE AND TIME OF CONTACT	CITY OFFICIAL CO	DNTACTED TITLE OF CITY OFFICIAL
MEANS AND MEDIUM OF LOBBYIN	G ACTIVITY (e.g. meeting,	text message, email, video conference)
COMMITTEE CONTRIBUTIONS (If ap	oplicable)	
Complete the table below if an ite	mization of any contribut	tions totaling \$100 or more was made by the lobbyist to any of the followi
committees: (a) a candidate's elec	ction committee; (b) a ca	ndidate-controlled ballot measure committee; (c) a candidate's professio
committees: (a) a candidate's elec	ction committee; (b) a ca	
committees: (a) a candidate's electer expense committee; or (d) a comm	tion committee; (b) a ca ittee primarily formed to	ndidate-controlled ballot measure committee; (c) a candidate's professio support or oppose one or more candidates.
committees: (a) a candidate's electer expense committee; or (d) a comm	tion committee; (b) a ca ittee primarily formed to	ndidate-controlled ballot measure committee; (c) a candidate's professio support or oppose one or more candidates.
committees: (a) a candidate's electer expense committee; or (d) a comm	tion committee; (b) a ca ittee primarily formed to	ndidate-controlled ballot measure committee; (c) a candidate's professio support or oppose one or more candidates.
committees: (a) a candidate's electer expense committee; or (d) a comm	tion committee; (b) a ca ittee primarily formed to	ndidate-controlled ballot measure committee; (c) a candidate's professio support or oppose one or more candidates.
committees: (a) a candidate's electer expense committee; or (d) a comm	tion committee; (b) a ca ittee primarily formed to	ndidate-controlled ballot measure committee; (c) a candidate's professio support or oppose one or more candidates.
committees: (a) a candidate's electer expense committee; or (d) a comm	tion committee; (b) a ca ittee primarily formed to	ndidate-controlled ballot measure committee; (c) a candidate's professio support or oppose one or more candidates.
committees: (a) a candidate's elec expense committee; or (d) a comm DATE OF CONTRIBUTION	tion committee; (b) a ca ittee primarily formed to s AMOUNT	ndidate-controlled ballot measure committee; (c) a candidate's professio support or oppose one or more candidates.
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committees: (a) a candidate's elec expense committee; or (d) a comm DATE OF CONTRIBUTION FOR EXPENDITURE LOBBYIST ON Provide the following information	Lition committee; (b) a ca ittee primarily formed to s AMOUNT ILY regarding each expendi	ndidate-controlled ballot measure committee; (c) a candidate's professio support or oppose one or more candidates. COMMITTEE NAME
committees: (a) a candidate's elec expense committee; or (d) a comm DATE OF CONTRIBUTION FOR EXPENDITURE LOBBYIST ON Provide the following information directly with any City official in ord	Lition committee; (b) a ca ittee primarily formed to s AMOUNT ILY regarding each expendi er to attempt to influence	ndidate-controlled ballot measure committee; (c) a candidate's professio support or oppose one or more candidates. COMMITTEE NAME
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committees: (a) a candidate's elec expense committee; or (d) a comm DATE OF CONTRIBUTION FOR EXPENDITURE LOBBYIST ON Provide the following information directly with any City official in ord	Lition committee; (b) a ca ittee primarily formed to s AMOUNT ILY regarding each expendi er to attempt to influence	ndidate-controlled ballot measure committee; (c) a candidate's professio support or oppose one or more candidates. COMMITTEE NAME

### **SECTION 4 - REGISTRANT VERIFICATION**

I AM FAMILIAR WITH THE PROVISIONS OF SECTION 1-6-107 OF THE IRVINE MUNICIPAL CODE. MY LOBBYING ACTIVITIES WILL NOT VIOLATE THOSE PROVISIONS.

I HAVE USED ALL REASONABLE DILIGENCE IN PREPARING THIS REPORT AND HAVE PERSONAL KNOWLEDGE OF THE MATTERS HEREOF. I CERTIFY UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF CALIFORNIA THAT THE FORGOING IS TRUE AND CORRECT.

REGISTRANT LOBBYIST SIGNATURE

DATE

TITLE (If representing firm)

LOBBYING FIRM NAME

A Basic Guide to Lobbying Registration and Disclosure in the City of Irvine, and the required registration and reporting forms are available online at <u>cityofirvine.org</u>.