### VIRGINIA CONFLICT OF INTEREST AND ETHICS ADVISORY COUNCIL

# Lobbyist's Disclosure Statement (Rev. 09/2015)

Filir	ng Period:
	May 1 - October 31
	November 1 - April 30
PAF	RT I:
1.	PRINCIPAL:
	In Part I, item 2a, provide name of the individual authorizing your employment as a lobbyist. The lobbyist filing this statement MAY NOT list his name in item 2a.
2a.	Name:
2b.	Permanent BusinessAddress:
2c.	Business Telephone:
3.	Provide a list of executive and legislative actions (with as much specificity as possible) for which you lobbied and a description of activities conducted.
4.	<b>INCORPORATED FILINGS:</b> If you are filing an incorporated disclosure statement, please complete the following:
	Individual filing financial information:
	Individuals to be included in the filing:
	*If you are not the individual filing the financial information you may proceed to Part II and you are not required to complete schedules A, B, or C.
5.	Please indicate which schedules will be attached to your disclosure statement:
	[ ] Schedule A: Entertainment Expenses
	[ ] Schedule B: Gifts
	Schedule C: Other Expenses

6.	EXPENDITURE TOTALS:	
	a. Entertainment	\$
	b. Gifts	\$
	c. Communications	\$
	d. Personal living and travel expenses	\$
	e. Compensation of lobbyists	\$
	f. Honoraria	\$
	g. Other	\$
	TOTAL	\$
PAF	RT II:	
1a.	NAME OF LOBBYIST:	
1b.	Permanent	
	Business Address:	
1c.	Business Telephone:	
2.	As a lobbyist, you are: (check one)	
	[ ] <b>EMPLOYED</b> (on the payroll of the princ	sipal)
	[ ] <b>RETAINED</b> (not on the payroll of the pr	incipal, however compensated)
	[ ] NOT COMPENSATED (not compensate	ed, expenses may be reimbursed)
3.	List all lobbyists other than yourself who regi	stered to represent your principal.
4	- LIEMBLOVEDII	
4.	If you selected "EMPLOYED" as your answe	r to Part II, item 2, provide your job title

**PLEASE NOTE:** Some lobbyists are not individually compensated for lobbying activities. This may occur when several members of a firm represent a single principal. The principal, in turn, makes a single payment to the firm. If this describes your situation, do not answer Part II, items 5a and 5b. Instead, complete Part III, items 1 and 2.

5a.	What was the <b>DOLLAR AMOUNT OF YOUR COMPENSATION</b> as a lobbyist? (If you have job responsibilities other than those involving lobbying, you may have to prorate to determine the part of your salary attributable to your lobbying activities.) <b>Transfer your answer to this item to Part I, item 6e.</b>
5b.	Explain how you arrived at your answer to Part II, item 5a.
PAR	T III:
<b>PLE</b> secti	<b>ASE NOTE:</b> If you answered Part II, items 5a and 5b, you WILL NOT complete this on.
1.	List all members of your firm, organization, association, corporation, or other entity who furnished lobbying services to your principal.
2.	Indicate the total amount paid to your firm, organization, association, corporation, or other entity for services rendered. (Transfer your answer to this item to Part I, item 6e.)

# SCHEDULE A ENTERTAINMENT EXPENSES

**PLEASE NOTE:** Any single entertainment event included in the expense totals of the principal, with a value greater than \$50, should be itemized below. *Transfer any totals from this schedule to Part I, item 6a.* (Please duplicate as needed.)

Date and Location of Event:		
Description of Events		
Description of Event:		
Total Number of Persons Attending:		
	and Executive Officials or Members of Their Immeds only if the average value for each person attending the	
Name(s):		
	Food	\$
	Beverages	\$
Transportation	of legislative and executive officials or members of their immediate families	\$
Lodging of legislati	ive and executive officials or members of their immediate families	\$
	Performers, speakers, etc.	\$
	Displays	\$
	Rentals	\$
	Service personnel	\$
	Miscellaneous	\$
	TOTAL:	\$

# SCHEDULE B

### **GIFTS**

**PLEASE NOTE**: Any single gift reported in the expense totals of the principal, with a value greater than \$50 should be itemized below. (Report meals, entertainment, and travel under Schedule A.) Transfer any totals from this schedule to Part I, item 6b. (Please duplicate as needed.)

Date of gift	
Description of gift	
Name of each legislative or executive official or member of his immediate family who is a recipient of a gift.	
Cost of individual gift	\$
Date of gift	
Description of gift	
Name of each legislative or executive official or member of his immediate family who is a recipient of a gift.	
Cost of individual gift	\$
1	
Date of gift	
Description of gift	
Name of each legislative or executive official or member of his immediate family who is a recipient of a gift.	
Cost of individual gift	\$
TOTAL COST TO PRINCIPAL	\$

## SCHEDULE C OTHER EXPENSES

**PLEASE NOTE:** This section is provided for any lobbying-related expenses not covered by Part I, items 6a – 6f. An example of an expenditure to be listed on Schedule C would be the rental of a bill box during the General Assembly session. **Transfer the total from this schedule to Part I, item 6g.** (Please duplicate as needed.)

Date of Expense	Description of Expense	Amount
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$

<b>TOTAL "OTHER" EXPENSES:</b>	\$

#### **PART IV: STATEMENTS**

The following items are mandatory and if they are not properly completed, the entire filing will be rejected and returned to the lobbyist:

- (1) All signatures on the statement must be ORIGINAL in the format specified in the instructions provided by the Secretary that accompany this form. No stamps, or other reproductions of the individual's signature will be accepted. (Faxed or emailed copies will be accepted.)
- (2) An individual MAY NOT sign the disclosure statement as lobbyist and principal officer.

#### STATEMENT OF LOBBYIST

I, the undersigned registered lobbyist, do state that the information furnished on this disclosure statement and on all accompanying attachments required to be made thereto is, to the best of my knowledge and belief, complete and accurate.

#### SIGNATURE OF LOBBYIST

DATE

#### STATEMENT OF PRINCIPAL

I, the undersigned principal (or an authorized official thereof), do state that the information furnished on this disclosure statement and on all accompanying attachments required to be made thereto is, to the best of my knowledge and belief, complete and accurate.

#### SIGNATURE OF PRINCIPAL

DATE

(\*Not required if principal waived their signature requirement on the registration form.)