



County of Los Angeles
INSTRUCTIONS FOR
LOBBYIST QUARTERLY REPORT
FORM LOB 6

Chapter 2.160 of the
Los Angeles County Code

Every lobbyist must complete the Lobbyist Quarterly Report (**Form LOB 6**) for each calendar quarter, regardless of the level of activity of the lobbyist, and whether or not the lobbyist has incurred any expenses during the quarter. **NOTE:** An individual contract lobbyist (sole-proprietor) **also** must file reports as a lobbying firm.

- If you are registered as a lobbying firm, or are a partner, owner (including a sole-proprietor), or employee of a lobbying firm, your completed Form LOB 6 **must be attached** to the Lobbying Firm Quarterly Report (**Form LOB 7**).
- If you are an in-house employee lobbyist, your completed Form LOB 6 **must be attached** to your Lobbyist Employer Quarterly Report (Form LOB 8).

PERIOD COVERED BY REPORT: The periods covered and the filing deadlines for the Lobbyist Quarterly Reports are as follows:

PERIOD COVERED

January, February and March
April, May and June
July, August and September
October, November and December

FILING DEADLINE

April 30th
July 31st
October 31st
January 31st

IMPORTANT: A late filing fee of \$25 per day will be assessed for the first ten days a report is filed beyond the due date. The late filing fee will then increase to \$50 per day for the second ten days; and thereafter, the late filing fee will be \$75 per day until the filer comes into compliance with the provisions of the lobbyist ordinance or the date that other sanctions or penalties are imposed, which may include, but are not limited to, a civil liability in the amount of up to \$5000, an administrative fine of up to \$5000 and a noncompliance fee of up to \$5000.

If a report is sent by first class mail, it is considered received on the date of the postmark. Filing deadlines which fall on a Saturday, Sunday or official County holiday are extended to the next regular business day.

No fee is required for filing a Lobbying Firm Quarterly Report (Form LOB 7) or a Lobbyist Employer Quarterly Report (Form LOB 8).

FILE THIS FORM WITH ORIGINAL SIGNATURE WITH THE:

Executive Officer of the Board of Supervisors
County of Los Angeles
Kenneth Hahn Hall of Administration
500 W. Temple Street, Room 383
Los Angeles, California 90012
(213) 974-1093

INTERNET ACCESS

The Los Angeles County Lobbyist Ordinance, rules, operational procedures, registration/reporting forms, registrants and their quarterly activity reports are accessible at:

<http://bos.co.la.ca.us/>

COUNTY OF LOS ANGELES
**INSTRUCTIONS FOR COMPLETING THE
LOBBYIST QUARTERLY REPORT
FORM LOB 6**

Chapter 2.160 of the
Los Angeles County Code

NAME OF FIRM OR EMPLOYER: If you are registered as a lobbying firm, or you are a partner, owner, or employee of a lobbying firm, provide the name of the lobbying firm as contained on the firm's registration statement (Form LOB 1). If you are an in-house employee lobbyist, enter the name of your employer as contained on the employer's registration statement (Form LOB 3).

ACTIVITY EXPENSES: An "Activity Expense" is any expense incurred or payment made by a lobbyist which benefits in whole or in part any County official or member of the immediate family of a County official, regardless of whether the expense or payment is reimbursed by the person on whose behalf the county lobbying services are performed. Activity expenses include gifts, honoraria, consulting fees, salaries, and any other form of compensation.

A "County official" is any member of the Board of Supervisors, the Sheriff, the Assessor, the District Attorney, a County Commissioner, and any other County officer or employee whose duties are not clerical or manual.

A "Gift" shall be defined as set forth in the Political Reform Act, Government Code Section 81000 et seq. and the regulations adopted thereunder; except that the exclusion for campaign contributions shall be defined and governed as set forth in Chapter 2.160 of the Los Angeles County Code.

You must itemize all "Activity Expenses" arranged, incurred or paid by you, and you must report activity expenses during the period in which they occurred regardless of whether they were actually paid during the period.

- If you have not paid, incurred, or arranged any activity expenses during the period, check the box to indicate that you have nothing to report.
- If you have paid, incurred or arranged any activity expense:

Date: Enter the date the expense was incurred or the event occurred.

Name, Position, and Address of Payee: List the name and address of the vendor or other person to whom payment was made or incurred, if different than beneficiary.

Name and Position of County Officials and Amount Benefiting Each: List the name and position, of each County official who benefited from the payment. Also list the portion of the total activity expense which is attributable to each official. Note: You are not required to list in this section yourself or any other person who benefited who is not a County official. You must, however, maintain in your records the total number of persons who benefited.

Description of Consideration: Describe the goods or services received by the County official(s), e.g., lunch, drinks, flowers, etc.

Total Amount of Activity Expenses: Enter the total amount paid, arranged, or incurred for the activity, not just the amount which benefited the County official.



COUNTY OF LOS ANGELES

**Lobbyist Quarterly Report
Form LOB 6**

OFFICIAL USE ONLY

IMPORTANT: This report is to be completed by the lobbyist and attached to the Lobbying Firm Quarterly Report (Form LOB 7), or Lobbyist Employer Quarterly Report (Form LOB 8), whichever is applicable.

Page _____ of _____

Quarterly Report Covers from _____ through _____
Type or Print in Ink

Name: Last: First: M.I.:

Name of Firm or Employer Telephone Number & Extension

()

Business Address: (Number, Street & Suite) City: State: Zip Code:

Mailing Address: (If different than above)

ACTIVITY EXPENSES PAID, INCURRED, ARRANGED, OR PROVIDED BY THE LOBBYIST

(See instructions)

I have reviewed the form and instructions for reporting Activity Expenses and I have nothing to report.

Date	Name, Position & Address of Payee (If different than Beneficiary)	Names and Positions of County officials (Beneficiaries) Amount Benefiting Each		Description of Consideration	Total Amount of Activity Expense

If more space is needed, check box and continue on next page.

VERIFICATION

I have used all reasonable diligence in preparing this Statement. I have reviewed this Statement and to the best of my knowledge the information contained herein is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on (Date)	At (City and State)	By (Signature of Lobbyist)
--------------------	---------------------	----------------------------

**Lobbyist Quarterly Report
Form LOB 6**

Type or Print in Ink

Name of Lobbyist: _____ Period Covered: _____ through _____

ACTIVITY EXPENSES (CONTINUED)					
Date	Name, Position & Address of Payee (If different than Beneficiary)	Names and Positions of County officials (Beneficiaries) Amount Benefiting Each		Description of Consideration	Total Amount of Activity Expense

If more space is needed, check box and attach continuation sheet.