



COUNTY OF LOS ANGELES
**INSTRUCTIONS FOR COMPLETING THE
LOBBYING FIRM QUARTERLY REPORT
AND
CEASING ACTIVITY REPORT
FORM LOB 7**

Chapter 2.160 of the
Los Angeles County Code

The Lobbying Firm Quarterly Report (Form LOB 7) must be completed by registered lobbying firms for each calendar quarter regardless of the level of activity of the firm, and whether or not the firm has received or made any payments to influence official County action during the quarter. **REMINDER:** An individual contract lobbyist (sole proprietor) is a lobbying firm.

The firm must attach a Lobbyist Quarterly Report (Form LOB 6) for each partner, owner or employee of the lobbying firm who qualifies as a lobbyist.

PERIOD COVERED BY REPORT: The period covered and the filing deadlines for the Lobbying Firm Quarterly Reports are as follows:

PERIOD COVERED	FILING DEADLINE
January, February and March	April 30 th
April, May and June	July 31 st
July, August and September	October 31 st
October, November, December	January 31 st

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.

NOTE: If you are using this form to terminate your registration, it must be filed within 10 days of ceasing all County lobbying activities.

If a report is sent by first class mail, it is considered received on the date of the postmark. Filing deadlines that 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).

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/>

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FORM LOB 7

PERIOD COVERED BY REPORT: The period covered is the calendar quarter. (See the cover sheet of this form for the period covered.)

Part I – List all owners, partners, officers, and employees whose Lobbyist Quarterly Reports (Form LOB 6) are attached to this report, or who engaged in direct communication during the period:

- If an owner, partner, officer or employee of the lobbying firm qualifies as a “lobbyist”, you must attach a Lobbyist Quarterly Report (Form LOB 6) completed by that individual, and you must list that individual’s name in Part I of the Form LOB 7.

NOTE: Do not include lobbyists who are employed by lobbying firms with which you subcontract.

- Also list any owner, partner, officer or employee of the lobbying firm who does not qualify as a “lobbyist” but who, on at least five separate occasions during the reporting period, engaged in direct communication with county officials for the purpose of influencing official action. **Do not include employees of your firm whose actions were purely clerical.**

SUMMARY OF PAYMENTS: Enter the total amount received and paid this period from each section of the report.

NOTICE OF TERMINATION: Check the box if you are terminating all County lobbying activities.

Each Lobbying Firm that, during the quarter, ceased all County lobbying activity which required the filing of the Lobbying Firm Registration Statement (Form LOB 1) must complete the Notice of Termination section of this form to terminate its registration and its reporting obligations.

You are required to report any reportable activities that occurred during the quarter up to the termination date. You must file this report within 10 days of ceasing all activities.

NOTE: Use Amendment to Registration Statement (Form LOB 5) if you merely want to delete a lobbyist from your firm's registration.

VERIFICATION: The report must be verified and signed by the person who is designated on the firm’s registration statement as the responsible officer of the firm.



COUNTY OF LOS ANGELES

Lobbying Firm Quarterly Report/Ceasing Activity Report Form LOB 7

OFFICIAL USE ONLY

Page _____ of _____

Quarterly Report Covers from _____ through _____

Type or Print in Ink

Name of Lobbying Firm:

Telephone Number & Extension:

Business Address (Number, Street & Suite):

City:

State:

Zip Code:

Mailing Address (If different than above):

City:

State:

Zip Code:

Part I - List the name and title of each owner, partner, officer and employee of the firm who qualifies as a lobbyist. (Be sure to attach a Form LOB 6 for each lobbyist listed.) Also list and check the box next to each person who does not qualify as a lobbyist but who, on at least five (5) separate occasions during the report period, engaged in direct communication with County officials to influence County action (see instructions).

Table with 2 columns: Name, Title and checkboxes for qualification.

SUMMARY OF PAYMENTS

A. GRAND TOTAL PAYMENTS RECEIVED: \$ _____ (From Subtotals in Part II)

B. TOTAL ACTIVITY EXPENSES: \$ _____ (From Part III, Section A, 3)

C. TOTAL PAYMENTS TO OTHER: LOBBYING FIRMS \$ _____ (From Part III, Section B)

D. GRAND TOTAL PAYMENTS MADE: \$ _____ (B and C above)

NOTICE OF TERMINATION

Check this box if this quarterly report constitutes a Termination Report for this lobbying firm

I certify that all activities which require registration under Section 2.160.030 of the Los Angeles County Code have ceased for this lobbying firm.

All County lobbying activities ceased effective

(DATE)

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.

Form with fields for Date, City and State, Signature of Responsible Officer, Name of Responsible Officer, and Title.

INSTRUCTIONS FOR COMPLETING PART II

FORM LOB 7

PART II – PAYMENTS RECEIVED IN CONNECTION WITH LOBBYING ACITIVITY: You must provide name, address and telephone number of each person or entity with whom the firm contracts, whether or not the firm received any payments from the person during the calendar quarter. If the firm received payments from another lobbying firm, list the other lobbying firm first, and then list the firm’s clients on whose behalf you lobby. In addition, for each client you must report:

- The specific County action(s) actively lobbied during the period.
- The total amount of fees and retainers received during the period.
- Any payments received during the period which were reimbursements for the firm’s expenses.
- Any other payments received in connection with lobbying activities, such as an advance for expenses, the receipt of goods, services or facilities from a client, etc. You must attach an explanation of any payment or other receipt reported in this section.
- The total amount received during the period from the client.
- Add the total payments received from all clients or employers and enter a total at the bottom of the page. Also enter the total in the “Summary of Payments” section on page 1, Line A.

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**Lobbying Firm Quarterly Report
Form LOB 7**

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NAME OF LOBBYING FIRM: _____ PERIOD COVERED: _____

PART II – PAYMENTS RECEIVED IN CONNECTION WITH LOBBYING ACTIVITY (Include payments from clients, including other lobbying firms, on whose behalf you perform lobbying services.) **(ROUND TO WHOLE DOLLARS.)**

Client's name, address and telephone number:

Description of the client's specific County lobbying interest(s):

Fees and Retainers	Reimbursements of Expenses	Other Payments (attach explanation)	Total This Period
\$	\$	\$	\$

Client's name, address and telephone number:

Description of the client's specific County lobbying interest(s):

Fees and Retainers	Reimbursements of Expenses	Other Payments (attach explanation)	Total This Period
\$	\$	\$	\$

Client's name, address and telephone number:

Description of the client's specific County lobbying interest(s):

Fees and Retainers	Reimbursements of Expenses	Other Payments (attach explanation)	Total This Period
\$	\$	\$	\$

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

SUBTOTAL

\$

INSTRUCTIONS FOR COMPLETING PART III

SECTION A

FORM LOB 7

PART III – PAYMENTS MADE IN CONNECTION WITH LOBBYING ACTIVITIES:

SECTION A: ACTIVITY EXPENSES: Only include in Section A those activity expenses which were arranged, incurred or paid by the lobbying firm. Do not include expenses reported on any of the attached LOB 6 forms.

An “Activity Expense” is any expense incurred or payment made by a lobbying firm 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 to 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 the firm, and you must report activity expenses during the period in which they occurred regardless of whether they were actually paid during the period.

- If the firm has not paid, incurred, or arranged any activity expenses during the period, other than those reported on the Lobbyist Quarterly Report (Form LOB 6), enter zero (0) in “Total Section A.1”.
- If the firm has 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, position or title 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 or title 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 EXPENSE: Enter the total amount paid, arranged, or incurred for the activity, not just the amount which benefited the County official(s).

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Lobbying Firm Quarterly Report
Form LOB 7

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NAME OF LOBBYING FIRM: _____ PERIOD COVERED: _____

PART III – PAYMENTS MADE IN CONNECTION WITH LOBBYING ACTIVITIES

SECTION A: ACTIVITY EXPENSES (see instructions)

1. ACTIVITY EXPENSES ARRANGED, INCURRED, OR PAID BY THE LOBBYING FIRM.
(Do not include expenses reported on any of the attached LOB 6 forms.)

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

TOTAL SECTION A.1. (If none, enter 0 and continue to section A.2.)

If more space is needed, check box and attach continuation sheets
(include all subtotals from continuation sheets)

\$

**2. TOTAL OF ALL ACTIVITY EXPENSES PAID, INCURRED, OR ARRANGED BY ALL LOBBYISTS EMPLOYED
BY THE LOBBYING FIRM AS REPORTED ON ATTACHED LOB 6 FORMS:**

\$

**3. TOTAL OF ALL ACTIVITY EXPENSES (Section A, 1 + 2) ENTER THIS FIGURE IN THE
"SUMMARY OF PAYMENTS" ON PAGE 1, LINE B:**

\$

INSTRUCTIONS FOR COMPLETING PART III

SECTION B

FORM LOB 7

PART III – PAYMENTS MADE IN CONNECTION WITH LOBBYING ACTIVITIES:

SECTION B: PAYMENTS TO OTHER LOBBYING FIRMS (Subcontractors):

If your lobbying firm subcontracts with another lobbying firm, you must report:

- The full name, address and telephone number of the subcontractor.
- The name of the employer or client for whom the subcontractor was retained to lobby.
- The total amount paid to the subcontractor during the period, including any amounts which were reimbursements for expenses incurred by the subcontractor.

Enter the total payments made during the period to all other lobbying firms. Also enter the total of this section in the "Summary of Payments" section, on Page 1, Line C.

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NAME OF LOBBYING FIRM: _____ PERIOD COVERED: _____

PART III – PAYMENTS MADE (Continued)

SECTION B: PAYMENTS MADE TO OTHER LOBBYING FIRMS (Subcontractors)

I HAVE NOTHING TO REPORT IN THIS SECTION

Name, Address and Telephone Number of Firm Contracted With	Name of Employer or Client For Whom Subcontractor was Retained to Lobby	Amount Paid To Subcontractor This Period
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
		\$
<input type="checkbox"/> If more space is needed, check box and attach continuation sheets.		TOTAL PAYMENTS (Include all subtotals from continuation sheets) Enter the total in the "Summary of Payments" on Page 1, line C: \$