



# Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

Office Use Only ☐

## Section 1: Cover Sheet

Use this form to:

- 1) Register as a lobbyist in accordance with City Code Section 4-8-5;
- 2) Amend or update registration information previously provided in accordance with City Code Section 4-8-5;
- 3) Terminate registration as a lobbyist per City Code Section 4-8-5;
- 4) Report lobbying activities engaged in during the preceding calendar quarter in accordance with Section 4-8-6 of the City Code; or
- 5) For entities electing to register and report as a business entity per City Code Section 4-8-4, this form must be filled out for each individual lobbyist employed by the entity and filed with the **Entity Reporting Cover Sheet**.

For detailed instructions on how to complete this form, see the **Lobbyist Reporting Form: Individual Reporting Guide**, or the **Lobbyist Reporting Form: Entity Reporting Guide**.

<b>LOBBYIST NAME</b>	<table><tr><td>Title</td><td>First Name*</td><td>Middle</td></tr><tr><td></td><td>KELAN</td><td></td></tr><tr><td>Last Name*</td><td colspan="2">Suffix</td></tr><tr><td>ROBINSON</td><td colspan="2"></td></tr></table> <p><input type="checkbox"/> My employer is a 501c(3) non-profit organization</p>	Title	First Name*	Middle		KELAN		Last Name*	Suffix		ROBINSON		
Title	First Name*	Middle											
	KELAN												
Last Name*	Suffix												
ROBINSON													
<b>LOBBYIST PERMANENT BUSINESS STREET ADDRESS</b>	<table><tr><td>Permanent Business Street Address*</td><td colspan="2">Apartment or Suite Number</td></tr><tr><td>100 Congress Ave.</td><td colspan="2">STE 1300</td></tr><tr><td>City*</td><td>State*</td><td>Zip Code*</td></tr><tr><td>Austin</td><td>TX</td><td>78701</td></tr></table>	Permanent Business Street Address*	Apartment or Suite Number		100 Congress Ave.	STE 1300		City*	State*	Zip Code*	Austin	TX	78701
Permanent Business Street Address*	Apartment or Suite Number												
100 Congress Ave.	STE 1300												
City*	State*	Zip Code*											
Austin	TX	78701											
<b>LOBBYIST BUSINESS MAILING ADDRESS</b>	<table><tr><td>Business Mailing Address*</td><td colspan="2">Apartment or Suite Number</td></tr><tr><td>100 Congress Ave.</td><td colspan="2">STE 1300</td></tr><tr><td>City*</td><td>State*</td><td>Zip Code*</td></tr><tr><td>Austin</td><td>TX</td><td>78701</td></tr></table>	Business Mailing Address*	Apartment or Suite Number		100 Congress Ave.	STE 1300		City*	State*	Zip Code*	Austin	TX	78701
Business Mailing Address*	Apartment or Suite Number												
100 Congress Ave.	STE 1300												
City*	State*	Zip Code*											
Austin	TX	78701											
<b>REPORT TYPE</b>	<p>Report Type*: Check all that apply</p> <table><tr><td><input type="checkbox"/> New Lobbyist Registration</td><td><input type="checkbox"/> Update Current Lobbyist Registration</td><td><input type="checkbox"/> Annual Renewal of Lobbyist Registration</td><td><input type="checkbox"/> Termination of Lobbyist Registration</td></tr><tr><td><input type="checkbox"/> Quarterly Activity Report: January</td><td><input type="checkbox"/> Quarterly Activity Report: April</td><td><input type="checkbox"/> Quarterly Activity Report: July</td><td><input type="checkbox"/> Quarterly Activity Report: October</td></tr></table>	<input type="checkbox"/> New Lobbyist Registration	<input type="checkbox"/> Update Current Lobbyist Registration	<input type="checkbox"/> Annual Renewal of Lobbyist Registration	<input type="checkbox"/> Termination of Lobbyist Registration	<input type="checkbox"/> Quarterly Activity Report: January	<input type="checkbox"/> Quarterly Activity Report: April	<input type="checkbox"/> Quarterly Activity Report: July	<input type="checkbox"/> Quarterly Activity Report: October				
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\* Indicates a required field



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- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.

<b>SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*</b>	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address 70 Pascal Lane		Suite or Apartment Number 
	City Austin	State TX	Zip Code 78746
	Property Legal Description 		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
| <input checked="" type="checkbox"/> City Infrastructure or Public Works             | <input type="checkbox"/> Labor or Workforce  | <input checked="" type="checkbox"/> Rules, Proposed Rules, or Rule Making                      |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input checked="" type="checkbox"/> Land Development or Land Use   | <input checked="" type="checkbox"/> Taxation or Fees   |
| <input checked="" type="checkbox"/> Code Compliance                                 | <input type="checkbox"/> Municipal Court   | <input type="checkbox"/> Technology or Communications  |
| <input checked="" type="checkbox"/> Construction                                    | <input type="checkbox"/> Municipal Legislation   | <input checked="" type="checkbox"/> Transportation or Mobility                                 |
| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods  | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                             |  |
| <input checked="" type="checkbox"/> Economic Development                            | <input type="checkbox"/> Other: <input type="text"/>   |  |

Add Additional Municipal Question

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<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address 721 Congress Ave		Suite or Apartment Number
	City Austin	State TX	Zip Code 78701
	Property Legal Description		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input checked="" type="checkbox"/> Historic Preservation  | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
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<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address 8509 FM 969		Suite or Apartment Number 
	City AUSTIN	State TX	Zip Code 78724
	Property Legal Description 		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
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	Address		Suite or Apartment Number
	4300 STAGGERBRUSH ROAD		
	City	State	Zip Code
	AUSTIN	TX	78749
	Property Legal Description		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
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	Address 710 WEST AVE		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78701
	Property Legal Description		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
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	Address		Suite or Apartment Number
	<input type="text" value="Colton Bluff Springs Road"/>		<input type="text"/>
	City	State	Zip Code
	<input type="text" value="AUSTIN"/>	<input type="text" value="TX"/>	<input type="text" value="78744"/>
Property Legal Description			
<input type="text"/>			

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input checked="" type="checkbox"/> Annexation                                      | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
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<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address 6500 RR 2222		Suite or Apartment Number 
	City AUSTIN	State TX	Zip Code 78730
	Property Legal Description 		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
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	Address 2300 CLOUD WAY		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78759
	Property Legal Description		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
| <input checked="" type="checkbox"/> City Infrastructure or Public Works             | <input type="checkbox"/> Labor or Workforce  | <input checked="" type="checkbox"/> Rules, Proposed Rules, or Rule Making                      |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input checked="" type="checkbox"/> Land Development or Land Use   | <input checked="" type="checkbox"/> Taxation or Fees   |
| <input checked="" type="checkbox"/> Code Compliance                                 | <input type="checkbox"/> Municipal Court   | <input type="checkbox"/> Technology or Communications  |
| <input checked="" type="checkbox"/> Construction                                    | <input type="checkbox"/> Municipal Legislation   | <input checked="" type="checkbox"/> Transportation or Mobility                                 |
| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods  | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                             |  |
| <input checked="" type="checkbox"/> Economic Development                            | <input type="checkbox"/> Other: <input type="text"/>   |  |

Add Additional Municipal Question

Delete this page



# Lobbyist Reporting Form

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To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.

<b>SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*</b>	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address		Suite or Apartment Number
	NW QUADRANT OF PEARCE LN & WOLF LN INTERSECTION		
	City	State	Zip Code
	Cedar Creek	TX	78612
	Property Legal Description		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
| <input checked="" type="checkbox"/> City Infrastructure or Public Works             | <input type="checkbox"/> Labor or Workforce  | <input checked="" type="checkbox"/> Rules, Proposed Rules, or Rule Making                      |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input checked="" type="checkbox"/> Land Development or Land Use   | <input checked="" type="checkbox"/> Taxation or Fees   |
| <input checked="" type="checkbox"/> Code Compliance                                 | <input type="checkbox"/> Municipal Court   | <input type="checkbox"/> Technology or Communications  |
| <input checked="" type="checkbox"/> Construction                                    | <input type="checkbox"/> Municipal Legislation   | <input checked="" type="checkbox"/> Transportation or Mobility                                 |
| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods  | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                             |  |
| <input checked="" type="checkbox"/> Economic Development                            | <input type="checkbox"/> Other:  |  |

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<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address		Suite or Apartment Number
	<input type="text"/>		<input type="text"/>
	City	State	Zip Code
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Property Legal Description		
	<input type="text" value="LOT 1, PLEASANT HILL SUBDIVISION"/>		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input type="checkbox"/> Real Estate   |
| <input checked="" type="checkbox"/> City Infrastructure or Public Works             | <input type="checkbox"/> Labor or Workforce  | <input checked="" type="checkbox"/> Rules, Proposed Rules, or Rule Making                      |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input checked="" type="checkbox"/> Land Development or Land Use   | <input checked="" type="checkbox"/> Taxation or Fees   |
| <input checked="" type="checkbox"/> Code Compliance                                 | <input type="checkbox"/> Municipal Court   | <input type="checkbox"/> Technology or Communications  |
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| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods  | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                             |  |
| <input checked="" type="checkbox"/> Economic Development                            | <input type="checkbox"/> Other: <input type="text"/>   |  |

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	Address		Suite or Apartment Number
	<input type="text"/>		<input type="text"/>
	City	State	Zip Code
	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Property Legal Description		
	<input type="text"/>		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
| <input checked="" type="checkbox"/> City Infrastructure or Public Works             | <input type="checkbox"/> Labor or Workforce  | <input checked="" type="checkbox"/> Rules, Proposed Rules, or Rule Making                      |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input checked="" type="checkbox"/> Land Development or Land Use   | <input checked="" type="checkbox"/> Taxation or Fees   |
| <input checked="" type="checkbox"/> Code Compliance                                 | <input type="checkbox"/> Municipal Court   | <input type="checkbox"/> Technology or Communications  |
| <input checked="" type="checkbox"/> Construction                                    | <input type="checkbox"/> Municipal Legislation   | <input checked="" type="checkbox"/> Transportation or Mobility                                 |
| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods  | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                             |  |
| <input checked="" type="checkbox"/> Economic Development                            | <input type="checkbox"/> Other: <input type="text"/>   |  |

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<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address 220 S. CONGRESS AVE		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78701
	Property Legal Description		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
| <input checked="" type="checkbox"/> City Infrastructure or Public Works             | <input type="checkbox"/> Labor or Workforce  | <input checked="" type="checkbox"/> Rules, Proposed Rules, or Rule Making                      |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input checked="" type="checkbox"/> Land Development or Land Use   | <input checked="" type="checkbox"/> Taxation or Fees   |
| <input checked="" type="checkbox"/> Code Compliance                                 | <input type="checkbox"/> Municipal Court   | <input type="checkbox"/> Technology or Communications  |
| <input checked="" type="checkbox"/> Construction                                    | <input type="checkbox"/> Municipal Legislation   | <input checked="" type="checkbox"/> Transportation or Mobility                                 |
| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods  | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                             |  |
| <input checked="" type="checkbox"/> Economic Development                            | <input type="checkbox"/> Other:  |  |

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<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address		Suite or Apartment Number
	823 CONGRESS AVE		
	City	State	Zip Code
	AUSTIN	TX	78701
	Property Legal Description		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input checked="" type="checkbox"/> Historic Preservation  | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
| <input checked="" type="checkbox"/> City Infrastructure or Public Works             | <input type="checkbox"/> Labor or Workforce  | <input checked="" type="checkbox"/> Rules, Proposed Rules, or Rule Making                      |
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| <input checked="" type="checkbox"/> Construction                                    | <input type="checkbox"/> Municipal Legislation   | <input checked="" type="checkbox"/> Transportation or Mobility                                 |
| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods  | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                             |  |
| <input checked="" type="checkbox"/> Economic Development                            | <input type="checkbox"/> Other:  |  |

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	<input type="text"/>		<input type="text"/>
	City	State	Zip Code
	<input type="text"/>	<input type="text"/>	<input type="text"/>
Property Legal Description			
<input type="text"/>			

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
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| <input checked="" type="checkbox"/> Construction                                    | <input type="checkbox"/> Municipal Legislation   | <input checked="" type="checkbox"/> Transportation or Mobility                                 |
| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods  | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                             |  |
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<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address 8701 N. MOPAC EXPRESSWAY		Suite or Apartment Number 
	City AUSTIN	State TX	Zip Code 78759
	Property Legal Description 		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
| <input checked="" type="checkbox"/> City Infrastructure or Public Works             | <input type="checkbox"/> Labor or Workforce  | <input checked="" type="checkbox"/> Rules, Proposed Rules, or Rule Making                      |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input checked="" type="checkbox"/> Land Development or Land Use   | <input checked="" type="checkbox"/> Taxation or Fees   |
| <input checked="" type="checkbox"/> Code Compliance                                 | <input type="checkbox"/> Municipal Court   | <input type="checkbox"/> Technology or Communications  |
| <input checked="" type="checkbox"/> Construction                                    | <input type="checkbox"/> Municipal Legislation   | <input checked="" type="checkbox"/> Transportation or Mobility                                 |
| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods  | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                             |  |
| <input checked="" type="checkbox"/> Economic Development                            | <input type="checkbox"/> Other: <input type="text"/>   |  |

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<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address 308 GUADALUPE STREET		Suite or Apartment Number 
	City AUSTIN	State TX	Zip Code 78701
	Property Legal Description 		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
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<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address 1800 WESTLAKE PASS		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78746
	Property Legal Description		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
| <input checked="" type="checkbox"/> City Infrastructure or Public Works             | <input type="checkbox"/> Labor or Workforce  | <input checked="" type="checkbox"/> Rules, Proposed Rules, or Rule Making                      |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input checked="" type="checkbox"/> Land Development or Land Use   | <input checked="" type="checkbox"/> Taxation or Fees   |
| <input checked="" type="checkbox"/> Code Compliance                                 | <input type="checkbox"/> Municipal Court   | <input type="checkbox"/> Technology or Communications  |
| <input checked="" type="checkbox"/> Construction                                    | <input type="checkbox"/> Municipal Legislation   | <input checked="" type="checkbox"/> Transportation or Mobility                                 |
| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods  | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                             |  |
| <input checked="" type="checkbox"/> Economic Development                            | <input type="checkbox"/> Other: <input type="text"/>   |  |

Add Additional Municipal Question

Delete this page



# Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
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<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address 5810 STEINER RANCH		Suite or Apartment Number 
	City AUSTIN	State TX	Zip Code 78732
	Property Legal Description 		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input type="checkbox"/> Finance, Budget, or Investments   | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
| <input checked="" type="checkbox"/> City Infrastructure or Public Works             | <input type="checkbox"/> Labor or Workforce  | <input checked="" type="checkbox"/> Rules, Proposed Rules, or Rule Making                      |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input checked="" type="checkbox"/> Land Development or Land Use   | <input checked="" type="checkbox"/> Taxation or Fees   |
| <input checked="" type="checkbox"/> Code Compliance                                 | <input type="checkbox"/> Municipal Court   | <input type="checkbox"/> Technology or Communications  |
| <input checked="" type="checkbox"/> Construction                                    | <input type="checkbox"/> Municipal Legislation   | <input checked="" type="checkbox"/> Transportation or Mobility                                 |
| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods  | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                             |  |
| <input checked="" type="checkbox"/> Economic Development                            | <input type="checkbox"/> Other: <input type="text"/>   |  |

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<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address 7200 N. MOPAC EXPRESSWAY		Suite or Apartment Number 
	City AUSTIN	State TX	Zip Code 78731
	Property Legal Description 		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
| <input checked="" type="checkbox"/> City Infrastructure or Public Works             | <input type="checkbox"/> Labor or Workforce  | <input checked="" type="checkbox"/> Rules, Proposed Rules, or Rule Making                      |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input checked="" type="checkbox"/> Land Development or Land Use   | <input checked="" type="checkbox"/> Taxation or Fees   |
| <input checked="" type="checkbox"/> Code Compliance                                 | <input type="checkbox"/> Municipal Court   | <input type="checkbox"/> Technology or Communications  |
| <input type="checkbox"/> Construction   | <input type="checkbox"/> Municipal Legislation   | <input checked="" type="checkbox"/> Transportation or Mobility                                 |
| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods  | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                             |  |
| <input checked="" type="checkbox"/> Economic Development                            | <input type="checkbox"/> Other:  |  |

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<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address 610 E. 11TH STREET / 705 E. 12TH STREET		Suite or Apartment Number 
	City AUSTIN	State TX	Zip Code 78701
	Property Legal Description 		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
| <input checked="" type="checkbox"/> City Infrastructure or Public Works             | <input type="checkbox"/> Labor or Workforce  | <input checked="" type="checkbox"/> Rules, Proposed Rules, or Rule Making                      |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input checked="" type="checkbox"/> Land Development or Land Use   | <input checked="" type="checkbox"/> Taxation or Fees   |
| <input checked="" type="checkbox"/> Code Compliance                                 | <input type="checkbox"/> Municipal Court   | <input type="checkbox"/> Technology or Communications  |
| <input checked="" type="checkbox"/> Construction                                    | <input type="checkbox"/> Municipal Legislation   | <input checked="" type="checkbox"/> Transportation or Mobility                                 |
| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods  | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input type="checkbox"/> Parks, Recreation, Libraries, or Museums  |  |
| <input checked="" type="checkbox"/> Economic Development                            | <input type="checkbox"/> Other:  |  |

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<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address 6001 AIRPORT BLVD		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78752
	Property Legal Description		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input checked="" type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling           |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
| <input checked="" type="checkbox"/> City Infrastructure or Public Works             | <input type="checkbox"/> Labor or Workforce  | <input checked="" type="checkbox"/> Rules, Proposed Rules, or Rule Making                                |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input checked="" type="checkbox"/> Land Development or Land Use   | <input checked="" type="checkbox"/> Taxation or Fees   |
| <input checked="" type="checkbox"/> Code Compliance                                 | <input type="checkbox"/> Municipal Court   | <input type="checkbox"/> Technology or Communications  |
| <input checked="" type="checkbox"/> Construction                                    | <input checked="" type="checkbox"/> Municipal Legislation  | <input checked="" type="checkbox"/> Transportation or Mobility   |
| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods  | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                             |  |
| <input checked="" type="checkbox"/> Economic Development                            | <input type="checkbox"/> Other: <input type="text"/>   |  |

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<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address		Suite or Apartment Number
	<input type="text"/>		<input type="text"/>
	City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	
	Property Legal Description		
	<input type="text"/>		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input type="checkbox"/> Affordability  | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
| <input checked="" type="checkbox"/> City Infrastructure or Public Works             | <input type="checkbox"/> Labor or Workforce  | <input checked="" type="checkbox"/> Rules, Proposed Rules, or Rule Making                      |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input checked="" type="checkbox"/> Land Development or Land Use   | <input checked="" type="checkbox"/> Taxation or Fees   |
| <input checked="" type="checkbox"/> Code Compliance                                 | <input type="checkbox"/> Municipal Court   | <input type="checkbox"/> Technology or Communications  |
| <input checked="" type="checkbox"/> Construction                                    | <input checked="" type="checkbox"/> Municipal Legislation  | <input checked="" type="checkbox"/> Transportation or Mobility                                 |
| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods  | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                             |  |
| <input checked="" type="checkbox"/> Economic Development                            | <input checked="" type="checkbox"/> Other: <input type="text" value="CODENEXT"/>                         |  |

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<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address 425 W. RIVERSIDE		Suite or Apartment Number 
	City AUSTIN	State TX	Zip Code 78704
	Property Legal Description 		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                    | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                      | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals   | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation  | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input checked="" type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation  | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
| <input checked="" type="checkbox"/> City Infrastructure or Public Works                | <input type="checkbox"/> Labor or Workforce  | <input checked="" type="checkbox"/> Rules, Proposed Rules, or Rule Making                      |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems    | <input checked="" type="checkbox"/> Land Development or Land Use   | <input checked="" type="checkbox"/> Taxation or Fees   |
| <input checked="" type="checkbox"/> Code Compliance                                    | <input type="checkbox"/> Municipal Court   | <input type="checkbox"/> Technology or Communications  |
| <input checked="" type="checkbox"/> Construction                                       | <input type="checkbox"/> Municipal Legislation   | <input checked="" type="checkbox"/> Transportation or Mobility                                 |
| <input type="checkbox"/> Contracts or Procurement                                      | <input checked="" type="checkbox"/> Neighborhoods  | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                    | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                             |  |
| <input checked="" type="checkbox"/> Economic Development                               | <input type="checkbox"/> Other: <input type="text"/>   |  |

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<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address 916 CONGRESS		Suite or Apartment Number 
	City AUSTIN	State TX	Zip Code 78701
	Property Legal Description 		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input checked="" type="checkbox"/> Historic Preservation  | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
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| <input checked="" type="checkbox"/> Code Compliance                                 | <input type="checkbox"/> Municipal Court   | <input type="checkbox"/> Technology or Communications  |
| <input checked="" type="checkbox"/> Construction                                    | <input type="checkbox"/> Municipal Legislation   | <input checked="" type="checkbox"/> Transportation or Mobility                                 |
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<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address 1112 S. 8TH STREET		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78702
	Property Legal Description		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
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## Section 2: Municipal Question

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<b>SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*</b>	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address 304 E. CESAR CHAVEZ		Suite or Apartment Number 
	City AUSTIN	State TX	Zip Code 78701
	Property Legal Description 		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input type="checkbox"/> Finance, Budget, or Investments   | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input checked="" type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                   | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
| <input checked="" type="checkbox"/> City Infrastructure or Public Works             | <input type="checkbox"/> Labor or Workforce  | <input checked="" type="checkbox"/> Rules, Proposed Rules, or Rule Making                      |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input checked="" type="checkbox"/> Land Development or Land Use   | <input checked="" type="checkbox"/> Taxation or Fees   |
| <input checked="" type="checkbox"/> Code Compliance                                 | <input type="checkbox"/> Municipal Court   | <input type="checkbox"/> Technology or Communications  |
| <input checked="" type="checkbox"/> Construction                                    | <input type="checkbox"/> Municipal Legislation   | <input checked="" type="checkbox"/> Transportation or Mobility                                 |
| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods  | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                             |  |
| <input checked="" type="checkbox"/> Economic Development                            | <input type="checkbox"/> Other: <input type="text"/>   |  |

Add Additional Municipal Question

Delete this page



# Lobbyist Reporting Form

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<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address 1901 SAN ANTONIO ST		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78705
	Property Legal Description		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
| <input checked="" type="checkbox"/> City Infrastructure or Public Works             | <input type="checkbox"/> Labor or Workforce  | <input checked="" type="checkbox"/> Rules, Proposed Rules, or Rule Making                      |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input checked="" type="checkbox"/> Land Development or Land Use   | <input checked="" type="checkbox"/> Taxation or Fees   |
| <input checked="" type="checkbox"/> Code Compliance                                 | <input type="checkbox"/> Municipal Court   | <input type="checkbox"/> Technology or Communications  |
| <input checked="" type="checkbox"/> Construction                                    | <input type="checkbox"/> Municipal Legislation   | <input checked="" type="checkbox"/> Transportation or Mobility                                 |
| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods  | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                             |  |
| <input checked="" type="checkbox"/> Economic Development                            | <input type="checkbox"/> Other:  |  |

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<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address S CONGRESS AND RALPH ABLENADO		Suite or Apartment Number
	City Austin	State TX	Zip Code 78701
	Property Legal Description		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
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| <input checked="" type="checkbox"/> Code Compliance                                 | <input type="checkbox"/> Municipal Court   | <input type="checkbox"/> Technology or Communications  |
| <input checked="" type="checkbox"/> Construction                                    | <input type="checkbox"/> Municipal Legislation   | <input checked="" type="checkbox"/> Transportation or Mobility                                 |
| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods  | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                             |  |
| <input checked="" type="checkbox"/> Economic Development                            | <input type="checkbox"/> Other: <input type="text"/>   |  |

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	Address		Suite or Apartment Number
	NW CORNER OF SLAUGHTER AND IH-35		
	City	State	Zip Code
	AUSTIN	TX	78745
	Property Legal Description		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input type="checkbox"/> Permits (Other)   |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
| <input checked="" type="checkbox"/> City Infrastructure or Public Works             | <input type="checkbox"/> Labor or Workforce  | <input checked="" type="checkbox"/> Rules, Proposed Rules, or Rule Making                      |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input checked="" type="checkbox"/> Land Development or Land Use   | <input checked="" type="checkbox"/> Taxation or Fees   |
| <input checked="" type="checkbox"/> Code Compliance                                 | <input type="checkbox"/> Municipal Court   | <input type="checkbox"/> Technology or Communications  |
| <input checked="" type="checkbox"/> Construction                                    | <input type="checkbox"/> Municipal Legislation   | <input checked="" type="checkbox"/> Transportation or Mobility                                 |
| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods  | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                             |  |
| <input checked="" type="checkbox"/> Economic Development                            | <input type="checkbox"/> Other:  |  |

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<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address 5210 N LAMAR BLVD		Suite or Apartment Number 
	City AUSTIN	State TX	Zip Code 78751
	Property Legal Description 		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
| <input checked="" type="checkbox"/> City Infrastructure or Public Works             | <input type="checkbox"/> Labor or Workforce  | <input checked="" type="checkbox"/> Rules, Proposed Rules, or Rule Making                      |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input checked="" type="checkbox"/> Land Development or Land Use   | <input checked="" type="checkbox"/> Taxation or Fees   |
| <input checked="" type="checkbox"/> Code Compliance                                 | <input type="checkbox"/> Municipal Court   | <input type="checkbox"/> Technology or Communications  |
| <input checked="" type="checkbox"/> Construction                                    | <input type="checkbox"/> Municipal Legislation   | <input checked="" type="checkbox"/> Transportation or Mobility                                 |
| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods  | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                             |  |
| <input checked="" type="checkbox"/> Economic Development                            | <input type="checkbox"/> Other: <input type="text"/>   |  |

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	Address		Suite or Apartment Number
	<input type="text"/>		<input type="text"/>
	City	State	Zip Code
	<input type="text"/>	TX	<input type="text"/>
	Property Legal Description		
	<input type="text"/>		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection  | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input type="checkbox"/> Finance, Budget, or Investments  | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                             | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation  | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input checked="" type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                    | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration  | <input checked="" type="checkbox"/> Real Estate  |
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| <input checked="" type="checkbox"/> Code Compliance                                 | <input type="checkbox"/> Municipal Court  | <input checked="" type="checkbox"/> Technology or Communications                               |
| <input checked="" type="checkbox"/> Construction                                    | <input type="checkbox"/> Municipal Legislation  | <input checked="" type="checkbox"/> Transportation or Mobility                                 |
| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods   | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                              |  |
| <input checked="" type="checkbox"/> Economic Development                            | <input checked="" type="checkbox"/> Other: <input type="text" value="INTERACTIVE WAYFINDING TECHNOLOGY"/> |  |

Add Additional Municipal Question

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<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address 413 NAVASOTA STREET		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78702
	Property Legal Description		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input type="checkbox"/> Real Estate   |
| <input checked="" type="checkbox"/> City Infrastructure or Public Works             | <input type="checkbox"/> Labor or Workforce  | <input checked="" type="checkbox"/> Rules, Proposed Rules, or Rule Making                      |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input checked="" type="checkbox"/> Land Development or Land Use   | <input checked="" type="checkbox"/> Taxation or Fees   |
| <input checked="" type="checkbox"/> Code Compliance                                 | <input type="checkbox"/> Municipal Court   | <input type="checkbox"/> Technology or Communications  |
| <input checked="" type="checkbox"/> Construction                                    | <input type="checkbox"/> Municipal Legislation   | <input checked="" type="checkbox"/> Transportation or Mobility                                 |
| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods  | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                             |  |
| <input checked="" type="checkbox"/> Economic Development                            | <input type="checkbox"/> Other: <input type="text"/>   |  |

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<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address 8212 BARTON CLUB DR		Suite or Apartment Number
	City AUSTIN	State TX	Zip Code 78735
	Property Legal Description		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)  |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                           | <input checked="" type="checkbox"/> Permits (Other)   |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                 | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation  | <input type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling           |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                   | <input type="checkbox"/> Quality of Life Affairs  |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration  | <input checked="" type="checkbox"/> Real Estate   |
| <input checked="" type="checkbox"/> City Infrastructure or Public Works             | <input type="checkbox"/> Labor or Workforce   | <input checked="" type="checkbox"/> Rules, Proposed Rules, or Rule Making                     |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input checked="" type="checkbox"/> Land Development or Land Use                              | <input checked="" type="checkbox"/> Taxation or Fees  |
| <input type="checkbox"/> Code Compliance  | <input type="checkbox"/> Municipal Court  | <input type="checkbox"/> Technology or Communications   |
| <input checked="" type="checkbox"/> Construction                                    | <input type="checkbox"/> Municipal Legislation  | <input checked="" type="checkbox"/> Transportation or Mobility                                |
| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods   | <input checked="" type="checkbox"/> Zoning or Platting  |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                  |   |
| <input checked="" type="checkbox"/> Economic Development                            | <input type="checkbox"/> Other: <input type="text"/>  |   |

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<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address		Suite or Apartment Number
	OLD HWY 20		
	City	State	Zip Code
	MANOR	TX	78653
	Property Legal Description		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)  |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)   |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling           |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs  |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate   |
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| <input type="checkbox"/> Construction   | <input type="checkbox"/> Municipal Legislation   | <input checked="" type="checkbox"/> Transportation or Mobility                                |
| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods  | <input checked="" type="checkbox"/> Zoning or Platting  |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                             |   |
| <input checked="" type="checkbox"/> Economic Development                            | <input type="checkbox"/> Other:  |   |

Add Additional Municipal Question

Delete this page



# Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 2: Municipal Question

For each municipal question on which the individual lobbyist will lobby, provide a separate page with

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.

<b>SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*</b>	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address E STATE HWY 71		Suite or Apartment Number
	City DEL VALLE	State TX	Zip Code 78617
	Property Legal Description		

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input checked="" type="checkbox"/> Affordability                                   | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
| <input checked="" type="checkbox"/> City Infrastructure or Public Works             | <input type="checkbox"/> Labor or Workforce  | <input checked="" type="checkbox"/> Rules, Proposed Rules, or Rule Making                      |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input type="checkbox"/> Land Development or Land Use  | <input checked="" type="checkbox"/> Taxation or Fees   |
| <input checked="" type="checkbox"/> Code Compliance                                 | <input type="checkbox"/> Municipal Court   | <input type="checkbox"/> Technology or Communications  |
| <input checked="" type="checkbox"/> Construction                                    | <input type="checkbox"/> Municipal Legislation   | <input checked="" type="checkbox"/> Transportation or Mobility                                 |
| <input type="checkbox"/> Contracts or Procurement                                   | <input checked="" type="checkbox"/> Neighborhoods  | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                             |  |
| <input checked="" type="checkbox"/> Economic Development                            | <input type="checkbox"/> Other:  |  |

Add Additional Municipal Question

Delete this page



# Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 2: Municipal Question

For each municipal question on which the individual lobbyist will lobby, provide a separate page with

- 1) a specific description of each municipal question
- 2) an address or legal description of the real property, if real property is the subject of the municipal question
- 3) the subject matter(s) from the list of subjects below that apply to the specific municipal question

To report more than one Municipal Question, click the "Add Additional Municipal Question" button below.

<b>SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*</b>	ENTITLEMENTS RELATED TO LAND DEVELOPMENT		
<b>PROPERTY ADDRESS OR LEGAL DESCRIPTION</b>	<input checked="" type="checkbox"/> This municipal question pertains to real property. *If checked, either a property address or legal description are required.		
	Address		Suite or Apartment Number
	<input type="text"/>		<input type="text"/>
	City	State	Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>	
Property Legal Description			
<input type="text"/>			
LOT 1-2 BLK A ALEXAN MOUNTAIN VIEW& PT LOT 1& LOT 2 BELVIN M E SUBD& ABS 86 SUR 75 BELLA AF ACR 10.6010			

Subject Matter(s)\*: Check all subject matters that apply to the municipal question above

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Accessibility or Persons with Disabilities                 | <input checked="" type="checkbox"/> Environmental Matters, Air or Water Quality, or Watershed Protection | <input checked="" type="checkbox"/> Permits (Building)   |
| <input type="checkbox"/> Affordability  | <input checked="" type="checkbox"/> Finance, Budget, or Investments                                      | <input checked="" type="checkbox"/> Permits (Other)  |
| <input type="checkbox"/> Animals  | <input type="checkbox"/> Health, Healthcare, Mental Health, or Human Services                            | <input type="checkbox"/> Public Safety, Policy, Fire, EMS, or Emergency Planning and Response  |
| <input type="checkbox"/> Annexation   | <input type="checkbox"/> Historic Preservation   | <input checked="" type="checkbox"/> Public Utilities, Energy, Water, Solid Waste, or Recycling |
| <input type="checkbox"/> Arts, Music, Film, Cultural or Creative Industries         | <input type="checkbox"/> Hospitality, Tourism, Events, or Convention Center                              | <input type="checkbox"/> Quality of Life Affairs   |
| <input type="checkbox"/> Aviation   | <input type="checkbox"/> Human Rights or Immigration   | <input checked="" type="checkbox"/> Real Estate  |
| <input checked="" type="checkbox"/> City Infrastructure or Public Works             | <input type="checkbox"/> Labor or Workforce  | <input checked="" type="checkbox"/> Rules, Proposed Rules, or Rule Making                      |
| <input type="checkbox"/> Civil Service, Municipal Employment, or Retirement Systems | <input type="checkbox"/> Land Development or Land Use  | <input checked="" type="checkbox"/> Taxation or Fees   |
| <input checked="" type="checkbox"/> Code Compliance                                 | <input type="checkbox"/> Municipal Court   | <input type="checkbox"/> Technology or Communications  |
| <input checked="" type="checkbox"/> Construction                                    | <input type="checkbox"/> Municipal Legislation   | <input checked="" type="checkbox"/> Transportation or Mobility                                 |
| <input type="checkbox"/> Contracts or Procurement                                   | <input type="checkbox"/> Neighborhoods   | <input checked="" type="checkbox"/> Zoning or Platting   |
| <input checked="" type="checkbox"/> Diversity, Equity, or Inclusion                 | <input checked="" type="checkbox"/> Parks, Recreation, Libraries, or Museums                             |  |
| <input checked="" type="checkbox"/> Economic Development                            | <input type="checkbox"/> Other: <input type="text"/>   |  |

Add Additional Municipal Question

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* <input type="text" value="Pacitti"/>		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	<input type="text" value="300 WEST 6TH STREET"/>		<input type="text" value="SUITE 2300"/>
	Client City*	Client State*	Client Zip Code*
	<input type="text" value="Austin"/>	<input type="text" value="TX"/>	<input type="text" value="78701"/>
	Nature of Client's Business* <input type="text" value="Real Estate Investment/ Development"/>		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(\$) Exact Amount
	<input type="text" value="less than \$10,000"/>	OR	<input type="text"/>
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

Section 3:

Client

Section 3a:

Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<div>CLIENT NAME</div> <div><input type="checkbox"/> Client is an individual</div>	<div>Organization Name or Client Last Name, as applicable*</div> <div>Nelsen</div>
<div>CLIENT ADDRESS AND NATURE OF BUSINESS</div>	<div><div><div>Client Business Address*</div><div>905 CONGRESS AVE</div></div><div><div>Client City*</div><div>AUSTIN</div></div><div><div>Nature of Client's Business*</div><div>Real Estate Investment/ Development</div></div></div> <div><div><div>Client Apartment or Suite Number</div><div></div></div><div><div>Client State*</div><div>TX</div></div><div><div>Client Zip Code*</div><div>78701</div></div></div>

Section 3b:

Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<div>CLIENT COMPENSATION</div>	<div><div>Compensation Category*</div><div>less than \$10,000</div></div> <div>OR</div> <div><div>(\$) Exact Amount</div><div></div></div>
	<div>Per City Code Section 4-8-6(a), the exact compensation amount is required for compensation totaling \$500,000 or more.</div>

\* Indicates a required field



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* KIPP AUSTIN		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 8509 FM 969	Client Apartment or Suite Number 	Client City* AUSTIN
	Client State* TX	Client Zip Code* 78724	Nature of Client's Business* EDUCATION

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* less than \$10,000	OR	(\$) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page





## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* GALLEGOS		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	5515 BALCONES DRIVE		
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78731
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(%) Exact Amount
	less than \$10,000	OR	
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* CIRRUS LOGIC, INC		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 800 W. 6TH STREET	Client Apartment or Suite Number 	Client City* AUSTIN
	Client State* TX	Client Zip Code* 78701	Nature of Client's Business* TECHNOLOGY

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* less than \$10,000	OR	(\$) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* CARMA TEXAS, INC.		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	11501 ALTERRA PKWY		STE 100
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78758
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(\$) Exact Amount
	less than \$10,000	OR	
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* ENDEAVOR REAL ESTATE GROUP, LLC		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 500 W. 5TH ST	Client Apartment or Suite Number STE 700	Client City* AUSTIN
	Client State* TX	Client Zip Code* 78701	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* less than \$10,000	OR	(\$) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* <input type="text" value="ORACLE"/>		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* <input type="text" value="9515 TOWNE CENTRE DR"/>	Client Apartment or Suite Number <input type="text"/>	
	Client City* <input type="text" value="SAN DIEGO"/>	Client State* <input type="text" value="CA"/>	Client Zip Code* <input type="text" value="92121"/>
	Nature of Client's Business* <input type="text" value="SOFTWARE APPLICATIONS"/>		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* <input type="text" value="less than \$10,000"/>	OR	(\$) Exact Amount <input type="text"/>
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



# Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* <div>QUALICO CR, L.P.</div>		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	<div>1440 THE LAKES BLVD</div>		<div></div>
	Client City*	Client State*	Client Zip Code*
	<div>PFLUGERVILLE</div>	<div>TX</div>	<div>78660</div>
	Nature of Client's Business* <div>REAL ESTATE INVESTMENT/ DEVELOPMENT</div>		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(\$) Exact Amount
	<div>less than \$10,000</div>	OR	<div></div>
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* RYAN COMPANIES, INC.		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	111 CONGRESS AVE		STE1850
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78701
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT/ CONSTRUCTION		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(%) Exact Amount
	less than \$10,000	OR	
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* TAYLOR MORRISON OF TEXAS, INC.		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 11200 LAKELINE BLVD	Client Apartment or Suite Number STE 150 A	
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78717
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* less than \$10,000	OR	(\$) Exact Amount  
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page





## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* YETI COOLER, LLC		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 5301 SOUTHWEST PARKWAY	Client Apartment or Suite Number STE 200	Client City* AUSTIN
	Client State* TX	Client Zip Code* 78735	Nature of Client's Business* RETAILER

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* less than \$10,000	OR	(\$) Exact Amount 
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



# Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* <div>BRICKMAN</div>		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	<div>2630 EXPOSITION BLVD.</div>		<div>STE 114</div>
	Client City*	Client State*	Client Zip Code*
	<div>AUSTIN</div>	<div>TX</div>	<div>78703</div>
	Nature of Client's Business* <div>REAL ESTATE INVESTMENT/ DEVELOPMENT</div>		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(%) Exact Amount
	<div>less than \$10,000</div>	OR	<div></div>
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

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## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* CENTURY LAND HOLDINGS LLC		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 6500 RIVER PLACE BLVD	Client Apartment or Suite Number 	Client City* AUSITN
	Client State* TX	Client Zip Code* 78730	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* less than \$10,000	OR	(\$) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



# Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* EURUS 8701 ATRIUM LLC		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*	Client Apartment or Suite Number	
	7200 NORTH MOPAC	STE 450	
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78731
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*	OR	(\$) Exact Amount
	less than \$10,000		
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* LINCOLN PROPERTY COMPANY		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 2000 MCKINNEY AVENUE	Client Apartment or Suite Number STE 100	
	Client City* DALLAS	Client State* TX	Client Zip Code* 75201
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* less than \$10,000	OR	(\$) Exact Amount
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* MCHALE		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 111 Congress Ave	Client Apartment or Suite Number STE 3000	Client City* AUSTIN
	Client State* TX	Client Zip Code* 78701	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* less than \$10,000	OR	(\$) Exact Amount
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



# Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* MU 15 INVESTMENTS, LTD.		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	7200 North Mopac		STE 450
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78731
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(%) Exact Amount
	less than \$10,000	OR	
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* THE KUCERA COMPANY		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	7200 N. MOPAC		STE 450
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78731
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(%) Exact Amount
	less than \$10,000	OR	
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page





# Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* VELOCITY CREDIT UNION		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	1717 W. 6TH STREET		STE 400
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78703
	Nature of Client's Business* FINANCIAL INSTITUTION		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(%) Exact Amount
	less than \$10,000	OR	
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



# Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* REDLEAF HIGHLAND, LLC		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	4015 GUADALUPE ST.		
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78751
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(%) Exact Amount
	less than \$10,000	OR	
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* SEAMLESS CAPITAL, L.P.		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	4407 BEE CAVES RD		STE 421
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78746
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(\$) Exact Amount
	less than \$10,000	OR	
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* STREAM REALTY		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	515 CONGRESS AVE		STE 1300
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78701
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(\$) Exact Amount
	less than \$10,000	OR	
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
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## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* MVA-916, LLC		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 515 CONGRESS AVE	Client Apartment or Suite Number STE 1400	Client City* AUSTIN
	Client State* TX	Client Zip Code* 78701	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* less than \$10,000	OR	(\$) Exact Amount
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
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## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* DAVIS WAYNE FS, LLC		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 3821 JUNIPER TRACE	Client Apartment or Suite Number STE 207	Client City* BEE CAVE
	Client State* TX	Client Zip Code* 78738	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* less than \$10,000	OR	(\$) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
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## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* WHITE LODGING SERVICES CORPORATION		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 701 E. 83RD AVE.	Client Apartment or Suite Number STE 17	
	Client City* MERRILLVILLE	Client State* IN	Client Zip Code* 46410
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* less than \$10,000	OR	(\$) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



# Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* BARSHOP & OLES COMPANY		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	801 CONGRESS AVE.		STE 300
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78701
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(%) Exact Amount
	less than \$10,000	OR	
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page





# Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* SPEEDY STOP FOOD STORES, LTD.		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	P.O. BOX 1876		
	Client City*	Client State*	Client Zip Code*
	VICTORIA	TX	77902
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(\$) Exact Amount
	less than \$10,000	OR	
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* HEB GROCERY STORES		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	646 SOUTH MAIN		
	Client City*	Client State*	Client Zip Code*
	SAN ANTONIO	TX	78204
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(%) Exact Amount
	less than \$10,000	OR	
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
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## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* FASKEN OIL AND RANCH, LTD		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 3600 BEE CAVE ROAD	Client Apartment or Suite Number STE 200	Client City* AUSTIN
	Client State* TX	Client Zip Code* 78746	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* less than \$10,000	OR	(\$) Exact Amount 
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



# Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
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## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* OBMSMG LLC		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	250 N. HARTFORD AVE		
	Client City*	Client State*	Client Zip Code*
	COLUMBUS	OH	43222
	Nature of Client's Business* TECHNOLOGY		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(%) Exact Amount
	less than \$10,000	OR	
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* OMNI HOTELS/BARTON CREEK CONFERENCE CENTER		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 4001 MAPLE AVENUE	Client Apartment or Suite Number STE 600	Client City* DALLAS
	Client State* TX	Client Zip Code* 75219	Nature of Client's Business* HOSPITALITY

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* less than \$10,000	OR	(\$ ) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* TITAN CAPITAL INVESTMENT GROUP, LLC		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 401 E. CITY AVENUE	Client Apartment or Suite Number STE 812	
	Client City* BALA CYNWYD	Client State* PA	Client Zip Code* 19004
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* less than \$10,000	OR	(\$) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



# Lobbyist Reporting Form

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or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* GOVEIA COMMERCIAL REAL ESTATE		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	24855 DEL PRADO		
	Client City*	Client State*	Client Zip Code*
	DANA POINT	CA	92629
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*	OR	(\$) Exact Amount
	less than \$10,000		
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

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## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* HEB/CHARLES BUTT (HOLDSWORTH CENTER)		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 646 SOUTH MAIN	Client Apartment or Suite Number 	
	Client City* SAN ANTONIO	Client State* TX	Client Zip Code* 78204
	Nature of Client's Business* EDUCATIONAL CENTER		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* less than \$10,000	OR	(\$) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

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## Lobbyist Reporting Form

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## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* 183 BLW, LP		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* PO BOX 9190	Client Apartment or Suite Number 	Client City* AUSTIN
	Client State* TX	Client Zip Code* 78766	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* \$0	OR	(\$) Exact Amount 
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

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## Lobbyist Reporting Form

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## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* 2501 W. BRAKER, L.P.		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 1601 S. MOPAC EXPRESSWAY	Client Apartment or Suite Number STE 175	
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78746
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* \$0	OR	(\$ ) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

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# Lobbyist Reporting Form

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## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* ALLEGIANCE MOBILE HEALTH		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	501 S. AUSTIN AVE		STE 1310
	Client City*	Client State*	Client Zip Code*
	GEORGETOWN	TX	78626
	Nature of Client's Business* AMBULATORY CARE		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(%) Exact Amount
	\$0	OR	
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* AUSTIN ACHIEVE PUBLIC SCHOOLS				
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 5908 MANOR ROAD	Client Apartment or Suite Number 	Client City* AUSTIN	Client State* TX	Client Zip Code* 78723
	Nature of Client's Business* EDUCATION				

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* \$0	OR	(\$) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* AUSTIN BAPTIST CHURCH		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	823 CONGRESS		STE 111
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78701
	Nature of Client's Business* RELIGIOUS ASSEMBLY		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(%) Exact Amount
	\$0	OR	
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* AUSTIN BOARD OF REALTORS		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	4800 SPICEWOOD SPRINGS RD		
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78759
	Nature of Client's Business* RESIDENTIAL REAL ESTATE ORGANIZATION		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*	OR	(\$) Exact Amount
	\$0		
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* AUSTIN PARK, LLC		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 700 12TH STREET	Client Apartment or Suite Number STE 220	Client City* GOLDEN
	Client State* CO	Client Zip Code* 80401	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* \$0	OR	(\$ ) Exact Amount 
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* BLENHEIM CORPORATION		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 4716 ST. JOHN'S DRIVE	Client Apartment or Suite Number 	Client City* DALLAS
	Client State* TX	Client Zip Code* 75205	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* \$0	OR	(\$) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page





## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* BROCK CONSULTING GROUP		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* P.O. BOX 160340	Client Apartment or Suite Number 	Client City* AUSTIN
	Client State* TX	Client Zip Code* 78716	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* \$0	OR	(\$) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* CAPRIDGE PARTNERS, LLC		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 823 CONGRESS AVE.	Client Apartment or Suite Number 	
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78701
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* \$0	OR	(\$) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* CIRCUIT OF THE AMERCIAS LLC		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 301 CONGRESS AVENUE	Client Apartment or Suite Number STE 220	Client City* AUSTIN
	Client State* TX	Client Zip Code* 78701	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* \$0	OR	(\$) Exact Amount 
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



# Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* CRV SHORELINE, L.P.		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	1601 S. MOPAC EXPRESSWAY		SUITE D-175
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78746
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*	OR	(\$) Exact Amount
	\$0		
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



# Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* CWS CAPITAL PARTNERS, LLC		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	9606 N. MOPAC EXPY		STE 500
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78759
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(%) Exact Amount
	\$0	OR	
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* DOWNTOWN AUSTIN ALLIANCE		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 211 E. 7TH STREET	Client Apartment or Suite Number STE 818	
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78701
	Nature of Client's Business* ADVOCACY ORGANIZATION		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* \$0	OR	(\$) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* GABLES RESIDENTIAL		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 6850 AUSTIN CENTER BLVD	Client Apartment or Suite Number 	Client City* AUSITN
	Client State* TX	Client Zip Code* 78751	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* \$0	OR	(\$) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* HELPING HAND HOME FOR CHILDREN		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	3804 AVENUE B		
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78751
	Nature of Client's Business* NON-PROFIT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(%) Exact Amount
	\$0	OR	
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page





## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* HPI REAL ESTATE & SERVICES INVESTMENT		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	3600 N. CAPITAL OF TEXAS HWY		BLDG B, STE 250
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78746
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(%) Exact Amount
	\$0	OR	
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



# Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* <div>LAMBERT</div>		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	<div>1316 S. CONGRESS</div>		<div></div>
	Client City*	Client State*	Client Zip Code*
	<div>AUSTIN</div>	<div>TX</div>	<div>78704</div>
	Nature of Client's Business* <div>REAL ESTATE INVESTMENT/ DEVELOPMENT</div>		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(%) Exact Amount
	<div>\$0</div>	OR	<div></div>
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

Section 3:

Client

Section 3a:

Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<div>CLIENT NAME</div> <div><input type="checkbox"/> Client is an individual</div>	<div>Organization Name or Client Last Name, as applicable*</div> <div>MAGELLAN DEVELOPMENT GROUP, LLC</div>
<div>CLIENT ADDRESS AND NATURE OF BUSINESS</div>	<div><div><div>Client Business Address*</div><div>225 N. COLUMBUS DRIVE</div></div><div><div>Client City*</div><div>CHICAGO</div></div><div><div>Nature of Client's Business*</div><div>REAL ESTATE INVESTMENT/ DEVELOPMENT</div></div></div> <div><div><div>Client Apartment or Suite Number</div><div>SUITE 100</div></div><div><div>Client State*</div><div>IL</div></div><div><div>Client Zip Code*</div><div>60601</div></div></div>

Section 3b:

Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.

Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<div>CLIENT COMPENSATION</div>	<div><div>Compensation Category*</div><div>\$0</div></div> <div>OR</div> <div><div>(\$) Exact Amount</div><div></div></div>
	<div>Per City Code Section 4-8-6(a), the exact compensation amount is required for compensation totaling \$500,000 or more.</div>

\* Indicates a required field



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* MEREDITH FAMILY REVOCABLE TRUST		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 248 ADDIE ROY RD	Client Apartment or Suite Number STE C200	Client City* AUSTIN
	Client State* TX	Client Zip Code* 78746	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* \$0	OR	(\$) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



# Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* <div>P &amp; S INVESTMENTS I, LLC</div>		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* <div>8208 LONG CANYON</div>	Client Apartment or Suite Number <div></div>	
	Client City* <div>AUSTIN</div>	Client State* <div>TX</div>	Client Zip Code* <div>78730</div>
	Nature of Client's Business* <div>REAL ESTATE INVESTMENT/ DEVELOPMENT</div>		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* <div>\$0</div>	OR	(\$) Exact Amount <div></div>
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



# Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* PARKE PROPERTIES I, L.P		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	1411 SLEDGE DRIVE		
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78734
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(%) Exact Amount
	\$0	OR	
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* PARKER		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 4213 HIDDEN CANYON COVE	Client Apartment or Suite Number 	
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78746
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* \$0	OR	(\$) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



# Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* <div>POWERFIN PARTNERS</div>		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	<div>100 CONGRESS AVENUE</div>		<div>17th FLOOR</div>
	Client City*	Client State*	Client Zip Code*
	<div>AUSTIN</div>	<div>TX</div>	<div>78701</div>
	Nature of Client's Business* <div>REAL ESTATE INVESTMENT/ DEVELOPMENT</div>		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*	OR	(\$) Exact Amount
	<div>\$0</div>		<div></div>
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page





## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* RAWSON SAUNDERS SCHOOL		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	2614 EXPOSITION BLVD		
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78703
	Nature of Client's Business* EDUCATION		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(%) Exact Amount
	\$0	OR	
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* REDDEHASE		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 715 GOLF CREST LANE	Client Apartment or Suite Number 	
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78734
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* \$0	OR	(\$) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* REIT MANAGEMENT AND RESEARCH LLC		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 255 WASHINGTON STREET 255 WASHINGTON STREET	Client Apartment or Suite Number STE 300	Client City* NEWTON
	Client State* MA	Client Zip Code* 02458	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* \$0	OR	(\$) Exact Amount 
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* <input type="text" value="RICE"/>		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	<input type="text" value="54 RAINEY ST"/>		<input type="text" value="#1004"/>
	Client City*	Client State*	Client Zip Code*
	<input type="text" value="AUSTIN"/>	<input type="text" value="TX"/>	<input type="text" value="78701"/>
	Nature of Client's Business* <input type="text" value="REAL ESTATE INVESTMENT/ DEVELOPMENT"/>		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(%) Exact Amount
	<input type="text" value="\$0"/>	OR	<input type="text"/>
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* ROBINSON RANCH		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* P.O. BOX 9556	Client Apartment or Suite Number 	Client City* AUSTIN
	Client State* TX	Client Zip Code* 78766	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* \$0	OR	(\$) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* RYAN STREET & ASSOCIATES		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 2414 EXPOSITION BLVD	Client Apartment or Suite Number STE B-140	Client City* AUSTIN
	Client State* TX	Client Zip Code* 78703	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* \$0	OR	(\$ ) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* SUCCESS FOODS MANAGEMENT LLC DBA TORCHY'S TACOS		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*	Client Apartment or Suite Number	
	4501 SPRINGDALE ROAD		
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78723
	Nature of Client's Business* RESTAURANTS		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(%) Exact Amount
	\$0	OR	
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* THE BROHN GROUP		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 1550 TIMOTHY ROAD	Client Apartment or Suite Number STE 201	Client City* ATHENS
	Client State* GA	Client Zip Code* 30606	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* \$0	OR	(\$) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page





## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* THE UNIVERSITY OF TEXAS SYSTEM		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	201 WEST 7TH ST		
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78701
	Nature of Client's Business* HIGHER EDUCATION		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*		(%) Exact Amount
	\$0	OR	
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* TRAMMELL CROW		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 100 CONGRESS AVE	Client Apartment or Suite Number STE 225	Client City* AUSTIN
	Client State* TX	Client Zip Code* 78701	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* \$0	OR	(\$) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* TRAVIS HOTEL GROUP, LLC		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 2711 N HASKELL AVE	Client Apartment or Suite Number STE 2800	Client City* DALLAS
	Client State* TX	Client Zip Code* 75204	Nature of Client's Business* HOSPITALITY

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* \$0	OR	(\$) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* TRINE WOODS, LLC		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 13945 U.S. HWY 183 N	Client Apartment or Suite Number STE D-190	
	Client City* AUSTIN	Client State* TX	Client Zip Code* 78717
	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* \$0	OR	(\$ ) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* TRUDY'S TEXAS STAR, INC.		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address*		Client Apartment or Suite Number
	8133 MESA DR, #206		
	Client City*	Client State*	Client Zip Code*
	AUSTIN	TX	78759
	Nature of Client's Business* RESTAURANTS		

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category*	OR	(\$) Exact Amount
	\$0		
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* W&G PARTNERSHIP		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 2801 VIA FORTUNA	Client Apartment or Suite Number STE 525	Client City* AUSTIN
	Client State* TX	Client Zip Code* 78746	Nature of Client's Business* REAL ESTATE INVESTMENT/ DEVELOPMENT

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* \$0	OR	(\$ ) Exact Amount 
Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.			

\* Indicates a required field

Add Another Client Page

Delete this page



## Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 3: Client

### Section 3a: Client Information

For each distinct client on whose behalf the individual lobbyist will lobby, provide a separate page with the information below.

For additional clients, click "Add Another Client Page" below.

<b>CLIENT NAME</b>  <input type="checkbox"/> Client is an individual	Organization Name or Client Last Name, as applicable* HYDE PARK BAPTIST CHURCH		
<b>CLIENT ADDRESS AND NATURE OF BUSINESS</b>	Client Business Address* 3901 SPEEDWAY	Client Apartment or Suite Number 	Client City* AUSTIN
	Client State* TX	Client Zip Code* 78751	Nature of Client's Business* RELIGIOUS ASSEMBLY

### Section 3b: Client Compensation

Disclosure of compensation received from each client is required for Quarterly Activity and/or Termination of Registration Reports.  
Leave these fields blank if you are not submitting a Quarterly Activity Report or a Termination of Registration.

<b>CLIENT COMPENSATION</b>	Compensation Category* \$0	OR	(\$) Exact Amount 
	Per City Code Section 4-8-6(a), the exact compensation amount is <b>required</b> for compensation totaling \$500,000 or more.		

\* Indicates a required field

Add Another Client Page

Delete this page



# Lobbyist Reporting Form

Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting

## Section 4: Employee

For each person employed or retained by the individual lobbyist for the purpose of assisting in or preparing for lobbying (excluding purely clerical or administrative assistance), provide a separate page with the information below (City Code Section 4-8-5(B)(4)(c)). If the lobbyist has retained no employees, leave this page blank.

For additional employees, click "Add Another Employee Page" below.

<b>PERSON EMPLOYED OR RETAINED</b>	<table><tr><td>Title</td><td>First Name*</td><td>Middle</td></tr><tr><td><input type="text"/></td><td><input type="text"/></td><td><input type="text"/></td></tr><tr><td>Last Name*</td><td>Suffix</td><td></td></tr><tr><td><input type="text"/></td><td><input type="text"/></td><td></td></tr><tr><td>Employer*</td><td>Occupation*</td><td></td></tr><tr><td><input type="text"/></td><td><input type="text"/></td><td></td></tr></table>	Title	First Name*	Middle	<input type="text"/>	<input type="text"/>	<input type="text"/>	Last Name*	Suffix		<input type="text"/>	<input type="text"/>		Employer*	Occupation*		<input type="text"/>	<input type="text"/>	
Title	First Name*	Middle																	
<input type="text"/>	<input type="text"/>	<input type="text"/>																	
Last Name*	Suffix																		
<input type="text"/>	<input type="text"/>																		
Employer*	Occupation*																		
<input type="text"/>	<input type="text"/>																		
<b>BUSINESS ADDRESS</b>	<table><tr><td>Business Address*</td><td>Apartment or Suite Number</td></tr><tr><td><input type="text"/></td><td><input type="text"/></td></tr><tr><td>City*</td><td>State* Zip Code*</td></tr><tr><td><input type="text"/></td><td><input type="text"/></td></tr></table>	Business Address*	Apartment or Suite Number	<input type="text"/>	<input type="text"/>	City*	State* Zip Code*	<input type="text"/>	<input type="text"/>										
Business Address*	Apartment or Suite Number																		
<input type="text"/>	<input type="text"/>																		
City*	State* Zip Code*																		
<input type="text"/>	<input type="text"/>																		
<b>MAYOR/COUNCIL RELATIVE OR HOUSEHOLD MEMBER</b>	<p><input type="checkbox"/> Is the person identified above related (within the third degree of consanguinity) to the Mayor or a Council Member, or a member of their household, as defined in City Code Section 4-8-6(5)?</p> <p>If yes, describe the nature of their employment *required if the above box is checked</p> <p><input type="text"/></p> <table><tr><td>First Name of Mayor/Council Member</td><td>Last Name of Mayor/Council Member</td></tr><tr><td><input type="text"/></td><td><input type="text"/></td></tr></table>	First Name of Mayor/Council Member	Last Name of Mayor/Council Member	<input type="text"/>	<input type="text"/>														
First Name of Mayor/Council Member	Last Name of Mayor/Council Member																		
<input type="text"/>	<input type="text"/>																		

\* Indicates a required field

Add Another Employee Page

Delete this page





## **Lobbyist Reporting Form**

*Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting*

Sections 5, 6 and 7 are for filing Quarterly Activity Reports or a Termination of Lobbyist Registration.

If you are not submitting this form during a quarterly activity reporting deadline or to terminate your lobbyist registration, proceed directly to Section 8: Declaration and Electronic Submission.



## Lobbyist Reporting Form

*Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting*

## Section 5: Statement of No Activity

### STATEMENT OF NO ACTIVITY

Lobbyists who have **no reportable activity** for the reporting period must submit a Statement of No Activity to the Clerk's Office (City Code Section 4-8-6(d)).

By checking the **No Activity Confirmation**, I affirm that I have no reportable activity during this reporting period, as defined by the four conditions below.

- I have no Client Compensation to report during this activity period (§4-8-6(A)(2)).
- I have no Expenditures for lobbying to report during this activity period (§4-8-6(A)(3)).
- I have not exchanged money, goods, services, or anything of value totaling more than \$500 with a business entity in which a City Official has a substantial economic interest during this reporting period (§4-8-6(A)(4)).
- I have no employees who are household members or related (within third degree of consanguinity or affinity) to the Mayor or a Council Member to report during this reporting period (§4-8-6(A)(5)).

### No Activity Confirmation

- ☐ I have read the four conditions above and confirm that I have no reportable activity to disclose during this reporting period



## Lobbyist Reporting Form

*Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting*

## Section 6: Expenditure Totals

Provide the total amount of expenditures for lobbying, sub-totaled by the categories listed below. A blank value will be interpreted as \$0 spent in that particular category (§4-8-6(A)(3)).

Cumulative expenditures of more than \$50 by an individual lobbyist per day per City Official in the expense categories listed below must be itemized on an Expenditure page.

<b>EXPENDITURE TOTALS</b>  (Blank values will be interpreted as \$0)	(\$) Reimbursement to Others	<input type="text"/>
	(\$) Food and Beverages	<input type="text"/>
	(\$) Transportation and Lodging	<input type="text"/>
	(\$) Gifts (other than Awards and Mementos)	<input type="text"/>
	(\$) Entertainment	<input type="text"/>
	(\$) Awards and Mementos	<input type="text"/>
	(\$) Honorariums	<input type="text"/>
	(\$) Attendance of Council Members at Charitable Events or Fundraisers	<input type="text"/>
	(\$) Media Communications (broadcast, print, advertising, etc.)	<input type="text"/>
(\$) Payments to persons who assist with Media Communications as defined in §4-8-6(A)(3)(j)	<input type="text"/>	



**Lobbyist Reporting Form**  
*Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting*

**Section 7:  
Expenditure**

For each itemized expenditure, provide a separate page with the information below. Cumulative expenditures of more than \$50 per day per City Official in the expense categories provided below must be itemized on an Expenditure Page (§4-8-6(A)(3)).

Per §4-8-6(A)(4), exchanges of money, goods, services, or anything of value to a business or business interest of a City Official that total \$500 or more during the reporting period must also be itemized on an Expenditure Page.

For additional expenditures, click "Add Another Expenditure Page" below.

<div>PAYEE NAME AND BUSINESS INTEREST</div> <div><input type="checkbox"/> Payee is an individual</div>	<div>Organization Name or Payee Last Name, as applicable*</div> <div></div> <div><input type="checkbox"/> This payee is a business or business interest of a City Official</div> <div><div>If yes, First Name of City Official</div><div>Last Name of City Official</div><div></div><div></div><div>Department of City Official</div><div>Job Title of City Official</div><div></div><div></div></div>
<div>PAYEE ADDRESS</div>	<div><div>Payee Address/ PO Box*</div><div>Payee Apartment or Suite Number</div><div></div><div></div><div>Payee City*</div><div>Payee State*</div><div>Payee Zip Code*</div><div></div><div></div><div></div></div>
<div>EXPENDITURE DETAILS</div>	<div><div>(\$) Expenditure Amount*</div><div>Expenditure Date*</div><div>Category*</div><div></div><div></div><div></div><div>Purpose of the Expenditure*</div><div></div></div>

Identify each City Official who benefitted from or who may have been influenced by the expenditure, if applicable

City Official First Name	City Official Last Name	Department	Job Title



## Lobbyist Reporting Form

*Required for Lobbyist Registration, Termination,  
or Quarterly Activity Reporting*

## Section 8: Declaration and Electronic Submission

### DECLARATION

By my signature below and subject to the penalty of perjury, I swear or affirm that the facts provided in this Lobbyist Reporting Form are true and correct to the best of my knowledge and belief and include all information required to be reported by me pursuant to City Code, Chapter 4-8.

I understand that pursuant to §4-8-9(E) of the Austin City Code, this report is made under oath regardless of whether there is any jurat or affidavit of verification, including a signature.

\_\_\_\_\_  
Signature of Registrant

7/28/2017

Report Date\*

KELAN ROBINSON

Printed/Typed Name

### Electronic Submission and Signature



I have completed a **Lobbyist Contact Information Form**, and my signature and e-mail address are both on file at the City Clerk's Office.