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.

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

This form must be submitted in its original digital format. Please do not print or scan this form.

LOBBYIST NAME	Title: First Name*: David Middle: Last Name*: Anderson Suffix: ☐ My employer is a 501c(3) non-profit organization
EMPLOYING ENTITY	☒ My employer is registered as a business entity, pays an entity registration fee, and is reporting on my behalf Entity/Organization Name*: Drenner Group
LOBBYIST PERMANENT BUSINESS STREET ADDRESS	Permanent Business Street Address*: 200 Lee Barton Drive Apartment or Suite Number: Suite 100 City*: Austin State*: TX Zip Code*: 78704
LOBBYIST BUSINESS MAILING ADDRESS	Business Mailing Address*: 200 Lee Barton Drive Apartment or Suite Number: Suite 100 City*: Austin State*: TX Zip Code*: 78704

* Indicates a required field

Lobbyist Reporting Form

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REPORT TYPE * *Check all that apply*	☐ I am registering as a new lobbyist ☐ I am renewing my annual lobbyist registration ☐ I am updating my current registration information outside of a Quarterly Activity Reporting Period ☒ I am submitting my Quarterly Activity Report, including client compensation and expenditures, for the following activity reporting deadline: ☐ January ☐ April ☐ July ☒ October ☐ I am correcting the information provided on a previously filed report Previous Report Type: _____ Previous Report Date _____ ☐ I am terminating my Lobbyist Registration with the City of Austin and this report is my final activity report.

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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.

SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Rezoning
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.

Address: 11501 Burnet Road

Suite or Apartment Number:

City: Austin

State: TX

Zip Code: 78758

Property Legal Description:

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

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

Add Additional Municipal Question | Delete this page

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Section 2: Municipal Question

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Managed Growth Agreement
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.

Address: 1300 Dittmar St.

Suite or Apartment Number:

City: Austin

State: TX

Zip Code: 78745

Property Legal Description:

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

- ☐ Accessibility or Persons with Disabilities
- ☐ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☐ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☐ Code Compliance
- ☐ Construction
- ☐ Contracts or Procurement
- ☐ Diversity, Equity, or Inclusion
- ☐ Economic Development
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- ☐ Health, Healthcare, Mental Health, or Human Services
- ☐ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☐ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☐ Neighborhoods
- ☐ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☒ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☐ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☐ Real Estate
- ☐ Rules, Proposed Rules, or Rule Making
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Rezoning

PROPERTY ADDRESS OR LEGAL DESCRIPTION

☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.

Address	Suite or Apartment Number
603 W. 8th Street	

City	State	Zip Code
Austin	TX	78701

Property Legal Description:

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

- ☐ Accessibility or Persons with Disabilities
- ☐ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☐ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☐ Code Compliance
- ☐ Construction
- ☐ Contracts or Procurement
- ☐ Diversity, Equity, or Inclusion
- ☐ Economic Development
- ☐ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☐ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☒ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☐ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☐ Neighborhoods
- ☐ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☐ Permits (Building, Site Plans)
- ☐ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☐ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☐ Real Estate
- ☐ Rules, Proposed Rules, or Rule Making
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Service Extension Request
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: Suite or Apartment Number: City: State: Zip Code: Property Legal Description: Bliss Spillar Rd, Manchaca, TX 78652 - WK 281 Tract; W FM 1626 Rd Austin, TX 78748-88.2 acre Gragg Tract

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

- ☐ Accessibility or Persons with Disabilities
- ☐ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☐ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☐ Code Compliance
- ☐ Construction
- ☐ Contracts or Procurement
- ☐ Diversity, Equity, or Inclusion
- ☐ Economic Development
- ☐ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☐ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☐ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☒ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☐ Neighborhoods
- ☐ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☐ Permits (Building, Site Plans)
- ☐ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☒ Public Utilities, Energy, Water, Solid Waste, or Recycling
- ☐ Quality of Life Affairs
- ☐ Real Estate
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Add Additional Municipal Question | Delete this page

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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Site Development Permit
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.

Address: 1701 Heatherwilde Blvd.

Suite or Apartment Number:

City: Austin

State: TX

Zip Code: 78660

Property Legal Description:

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

- ☐ Accessibility or Persons with Disabilities
- ☐ Affordability
- ☐ Animals
- ☐ Annexation
- ☐ Arts, Music, Film, Cultural or Creative Industries
- ☐ Aviation
- ☐ City Infrastructure or Public Works
- ☐ Civil Service, Municipal Employment, or Retirement Systems
- ☐ Code Compliance
- ☐ Construction
- ☐ Contracts or Procurement
- ☐ Diversity, Equity, or Inclusion
- ☐ Economic Development
- ☒ Environmental Matters, Air or Water Quality, or Watershed Protection
- ☐ Finance, Budget, or Investments
- ☐ Health, Healthcare, Mental Health, or Human Services
- ☐ Historic Preservation
- ☐ Hospitality, Tourism, Events, or Convention Center
- ☐ Human Rights or Immigration
- ☐ Labor or Workforce
- ☐ Land Development or Land Use
- ☐ Municipal Court
- ☐ Municipal Legislation
- ☐ Neighborhoods
- ☐ Parks, Recreation, Libraries, or Museums
- ☐ Other:
- ☒ Permits (Building, Site Plans)
- ☐ Permits (Other)
- ☐ Public Safety, Policy, Fire, EMS, or Emergency Planning and Response
- ☐ Public Utilities, Energy, Water, Solid Waste, or Recycling
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SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Planned Unit Development
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☒ This municipal question pertains to real property. *If checked, either a property address or legal description is required.

Address: 2904 Barton Skyway

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

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

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

SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Compatible uses with public parkland
PROPERTY ADDRESS OR LEGAL DESCRIPTION	☐ This municipal question pertains to real property. *If checked, either a property address or legal description is required. Address: Suite or Apartment Number City: State: Zip Code Property Legal Description

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

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

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.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period

CLIENT NAME ☐ Client is an individual	Organization Name or Client Last Name, as applicable* Brandywine Realty Trust
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 111 Congress Ave. Client Apartment or Suite Number: 30th Floor Client City*: Austin Client State*: TX Client Zip Code*: 78701 Nature of Client's Business*: Real Estate

Section 3b: Client Compensation

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

CLIENT COMPENSATION	Compensation Category*: $0 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max): Disclosure of client compensation is not provided because such disclosure would violate applicable state law in Texas Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.

* Indicates a required field

Add Another Client Page

Delete this page

Lobbyist Reporting Form

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

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period

CLIENT NAME ☐ Client is an individual	Organization Name or Client Last Name, as applicable* Eureka Holdings
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 5415 Maple Ave. Client Apartment or Suite Number: 204 Client City*: Dallas Client State*: TX Client Zip Code*: 75235 Nature of Client's Business*: Real Estate

Section 3b: Client Compensation

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

CLIENT COMPENSATION	Compensation Category*: $0 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max): Disclosure of client compensation is not provided because such disclosure would violate applicable state law in Texas Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.

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

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period

CLIENT NAME ☐ Client is an individual	Organization Name or Client Last Name, as applicable* Walters Southwest
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 1010 W. Martin Luther Kings Jr Blvd Client Apartment or Suite Number: Client City*: Austin Client State*: TX Client Zip Code*: 78701 Nature of Client's Business*: Real Estate

Section 3b: Client Compensation

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

CLIENT COMPENSATION	Compensation Category*: $0 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max): Disclosure of client compensation is not provided because such disclosure would violate applicable state law in Texas Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.

* Indicates a required field

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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.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period

CLIENT NAME ☐ Client is an individual	Organization Name or Client Last Name, as applicable* SDC Dittmar, LLC
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 2300 South Lamar Client Apartment or Suite Number: 106 Client City*: Austin Client State*: TX Client Zip Code*: 78704 Nature of Client's Business*: Real Estate

Section 3b: Client Compensation

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

CLIENT COMPENSATION	Compensation Category*: $0 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max): Disclosure of client compensation is not provided because such disclosure would violate applicable state law in Texas Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.

* Indicates a required field

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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.

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period

CLIENT NAME ☐ Client is an individual	Organization Name or Client Last Name, as applicable* QuikTrip Corporation
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 227 N. Loop 1604 E Client Apartment or Suite Number: 150 Client City*: San Antonio Client State*: TX Client Zip Code*: 78232 Nature of Client's Business*: Real Estate/General Retail Sales

Section 3b: Client Compensation

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

CLIENT COMPENSATION	Compensation Category*: $0 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max): Disclosure of client compensation is not provided because such disclosure would violate applicable state law in Texas Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.

* Indicates a required field

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Section 3: Client

Section 3a: Client Information

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

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period

CLIENT NAME ☐ Client is an individual	Organization Name or Client Last Name, as applicable* Arel Capital
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 540 Madison Avenue Client Apartment or Suite Number: 26th Floor Client City*: New York Client State*: NY Client Zip Code*: 10022 Nature of Client's Business*: Real Estate

Section 3b: Client Compensation

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

CLIENT COMPENSATION	Compensation Category*: $0 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max): Disclosure of client compensation is not provided because such disclosure would violate applicable state law in Texas Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.

* Indicates a required field

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Section 3: Client

Section 3a: Client Information

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

NO CLIENTS TO REPORT	☐ I represented no clients and received no client compensation during the applicable reporting period

CLIENT NAME ☐ Client is an individual	Organization Name or Client Last Name, as applicable* Austin Sports and Entertainment, LLC
CLIENT ADDRESS AND NATURE OF BUSINESS	Client Business Address*: 1123 3/4 Henninger Street Client Apartment or Suite Number: B Client City*: Austin Client State*: TX Client Zip Code*: 78702 Nature of Client's Business*: Real Estate/Sports and Recreation

Section 3b: Client Compensation

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

CLIENT COMPENSATION	Compensation Category*: $0 OR ($) Exact Amount: Per City Code Section 4-8-6(A)(j), the exact compensation amount is required for compensation totaling $500,000 or more. If you fail to provide the above Client Compensation information, provide your reason(s) (250 char. max): Disclosure of client compensation is not provided because such disclosure would violate applicable state law in Texas Disciplinary Rule 1.05 and Chapter 81 of the Texas Government Code.

* Indicates a required field

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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.

NO EMPLOYEES TO REPORT	☒ I employed or retained no employees during the applicable reporting period
PERSON EMPLOYED OR RETAINED	Title First Name* Middle Last Name * Suffix Employer* Occupation*
BUSINESS ADDRESS	Business Address* Apartment or Suite Number City* State* Zip Code*
MAYOR/COUNCIL RELATIVE OR HOUSEHOLD MEMBER	☐ 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(A)(5)? If yes, describe the nature of their employment *required if the above box is checked First Name of Mayor/Council Member Last Name of Mayor/Council Member

* 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.

STATEMENT OF NO EXPENDITURES MADE AND NO COMPENSATION RECEIVED

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 received no Client Compensation during this activity period (§4-8-6(A)(2)).
- I made no Expenditures for lobbying 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

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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.

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

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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.

PAYEE NAME AND BUSINESS INTEREST

☐ Payee is an individual

Organization Name or Payee Last Name, as applicable*

☐ This payee is a business or business interest of a City Official

If yes, First Name of City Official

Last Name of City Official

Department of City Official

Job Title of City Official

PAYEE ADDRESS

Payee Address/ PO Box*

Payee Apartment or Suite Number

Payee City*

Payee State*

Payee Zip Code*

EXPENDITURE DETAILS

($) Expenditure Amount*

Expenditure Date*

Category*

Purpose of the Expenditure*

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

Add Another Expenditure Page

Delete this page

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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.

David J. Anderson

Typed Name

10/4/2017

Report Date*

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.

New or Renewing Lobbyist Registrations are not considered complete until the appropriate registration fee has been paid. If you are registering for the first time as a lobbyist or are renewing your annual registration, you must remit payment via cash, check, or money order.