

Section 1: Cover Sheet

Office Use Only

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: Reporting Guide

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

FOR BEST RESULTS, PLEASE USE ADOBE READER OR ADOBE ACROBAT WHEN FILLING OUT THE FORM.

LOBBYIST NAME	Title First Name* Joshua Last Name* Burke My employer is a 501c(3) non-profit organization	Suffix	Middle C
EMPLOYING ENTITY	My employer is registered as a business entity, pays a behalf Entity/Organization Name*	ın entity registrati	on fee, and is reporting on my
LOBBYIST PERMANENT BUSINESS STREET ADDRESS	Permanent Business Street Address* Graves, Dougherty, Hearon & Moody, P.C. City* Austin	Apartment or 401 Congress A State* TX	Suite Number Avenue, Suite 2200 Zip Code* 78701
LOBBYIST BUSINESS MAILING ADDRESS	Business Mailing Address* 401 Congress Avenue City* Austin	Apartment or Suite 2200 State* TX	Suite Number Zip Code* 78701

	☐ I am renewing my annual lobbyist registration
	☐ I am updating my current registration information of my most recent Quarterly Activity Report
REPORT TYPE *	I am submitting my Quarterly Activity Report, including client compensation and expenditures, for the following activity reporting deadline:
Check all that apply	☐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.



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.

TO TOPOTE THOSE WHAT	pa: 20001101117 01101		aditional maniopal education			
SPECIFIC DESCRIPTION OF THE MUNICIPAL QUESTION*	Traffic control related to the property described below					
PROPERTY ADDRESS	☐ This municip description is		pertains to real property. *If c	hecked, e	either a prop	perty address or legal
OR	Address		Suite o	uite or Apartment Number		
LEGAL DESCRIPTION	600 Guadalupe St	reet				
	City			State		Zip Code
	Austin			TX		78701
	Property Legal De	escription				
Subject Matter(s)*: Check all subject Matter(s)	ject matters that	apply to the	municipal question above			
Accessibility or Persons with	Disabilities		mental Matters, Air or Water or Watershed Protection	\boxtimes	Permits (Bu	ilding, Site Plans)
☐ Affordability		Finance	, Budget, or Investments		Permits (Otl	her)
Animals			Healthcare, Mental Health, or Services			y, Policy, Fire, EMS, or Planning and Response
Annexation		Historic	Preservation		Public Utiliti or Recycling	ies, Energy, Water, Solid Waste, J
Arts, Music, Film, Cultural or Creative Industries		Hospital Center	lity, Tourism, Events, or Conventi	ion	Quality of Li	ife Affairs
Aviation		☐ Human	Rights or Immigration		Real Estate	
City Infrastructure or Public V	Vorks	Labor or	r Workforce		Rules, Propo	osed Rules, or Rule Making
Civil Service, Municipal Emplo Retirement Systems	oyment, or	Land De	velopment or Land Use		Taxation or	Fees
Code Compliance		Municip	al Court		Technology	or Communications
Construction		Municip	al Legislation	\boxtimes	Transportat	ion or Mobility
Contracts or Procurement		☐ Neighbo	orhoods		Zoning or Pl	atting
Diversity, Equity, or Inclusion		Parks, R	ecreation, Libraries, or Museums	S		
Economic Development		Other:				

Add Additional Municipal Question

Delete this page

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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 reporting period	t compensation (during the applicable
CLIENT NAME	Client Title Client First Name*		Middle
	Organization Name or Client Last Name, as applicable *	Client Suffix	
	Stratford Arms Limited Partnership		
	Client Business Address*	Client Apartmer	nt or Suite Number
	500 W. 6th Street		
CLIENT ADDRESS	Client City*	Client State*	Client Zip Code*
AND	Austin	TX	78701
NATURE OF	Nature of Client's Business*		
BUSINESS	Landlord of Stratford Arms Building		
			,

Section 3b: Client Compensation

Disclosure of compensation received for 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.

CLIENT	Compensation Category* less than \$10,000	OR	(\$) Exact Amount
COMPENSATION			
	Per City Code Section 4-8-6(A)(j), the exact compe for compensation totaling \$500,000 or more.	nsation	amount is required
	If you selected "I Decline/Refuse to Report", provi	de your	reason(s) (250 char. max):

* Indicates a required field

Add Another Client Page

Delete this page



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		yed or retained no employees du	ring the applicable	e reporting period
PERSON	Title	First Name*		Middle
EMPLOYED OR	Last Name *		Suffix	
RETAINED	Employer*		Occupation*	·
BUSINESS ADDRESS	Business Addre	ess*	Apartmen	t or Suite Number Zip Code*
MAYOR/COUNCIL RELATIVE OR	Council Mer	n identified above related (within th mber, or a member of their househo the nature of their employment *r	ld, as defined in City	y Code Section 4-8-6(A)(5)?
HOUSEHOLD MEMBER	First Name of I	Mayor/Council Member	Last Name of Ma	yor/Council Member

* Indicates a required field

Add Another Employee Page

Delete this page

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.



Section 5: Statement of No Activity

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



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.

	(\$) Reimbursement to Others
	(\$) Food and Beverages
	(\$) Transportation and Lodging
	(\$) Gifts (other than Awards and Mementos)
EXPENDITURE	(\$) Entertainment
TOTALS	(\$) Awards and Mementos
(Blank values	(\$) Honorariums
will be interpreted as \$0)	(\$) 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)



Add Another Expenditure Page

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 Title Payee First Name*		\neg
PAYEE NAME	Organization Name or Payee Last Name,	as applicable * Payee Suffix	
AND			
BUSINESS INTEREST	This payee is a business or business i	nterest of a City Official	
1	If yes, First Name of City Official	Last Name of City	Official
	Department of City Official	Job Title of City C	fficial
	Payee Address/ PO Box*	Payee Apart	ment or Suite Number
PAYEE	•		
ADDRESS	Payee City*	Payee State	* Payee Zip Code *
	(\$) Expenditure Amount * Expendit	ture Date [*] Category [*]	
EXPENDITURE	(ty) Experience / Infoam Experience	Gategory	
DETAILS	Purpose of the Expenditure*		
	Tarpose of the Experiantare		
Identify each City Official wh	no benefitted from or who may	y have been influenced by the	e expenditure if applicable
City Official First Name	City Official Last Name	Department Department	Job Title

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.

Josh Burke	5/7/2018
Typed Name	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.