

**Note:** This form is due in the Office of Legal Services, to the attention of the Ethics Compliance Officer, no later than April 1 of each calendar year. You may email the form to <u>LegalServices@ocps.net</u>.

## Expenditures for Calendar Year: 20\_\_\_\_

PART I: Lobbyist and Entity Information	
Check here [ ] if this is an amended report.	
Name of Lobbyist:	
Firm or Partnership Name (if applicable):	
Address of Lobbyist:	
Name of Represented Entity:	
Address of Represented Entity:	
PART II: Expenditures	
The following are the expenditures incurred by the Lobbyist, in connection with Lobbying on behalf of the above represented Entity.	
Categories of Expenditures	Amount
Food & Beverage	\$
Entertainment	\$
Research	\$
Communications	\$
Media Advertisements	\$
Publications	\$
Travel	\$
Lodging	\$
Special Events	\$
Other	\$
Total: \$	
Certification:	
I hereby certify to the accuracy of the above expenditure(s) reported on this statement.	
Signature of Lobbyist	Date
State of County of	
Sworn to and subscribed before me this day of known to me [ ] or produced	, 20, by (Lobbyist), who is personally as identification.
(stamp)	Notary Public Printed Name:
	Printed Name: My Commission Expires: Rev. 092415
	My Commission Expires Rev. 092415