

LOBBYIST COVER SHEET

Name of Filer: _____

Telephone: _____ E-mail: _____
Area Code Number

Business Address: _____
Number Street City State Zip

Registration Number: _____

This report is for a (check one of the following):

- Contract Lobbyist Business & Organization Lobbyist Expenditure Lobbyist

Attached to this cover sheet are the following forms (check all that apply):

Contract Lobbyist

- Form 1A
 Form 2A
 Form 3A
 No Form 3 is attached
(Filer engaged in no reportable activity)
 Form 4
 Form 5
 Form 6
 Form 7

Business & Organization Lobbyist

- Form 1B
 Form 2B
 Form 3B
 No Form 3 is attached
(Filer engaged in no reportable activity)
 Form 6
 Form 7

Expenditure Lobbyist

- Form 1C
 Form 2C
 Form 3C
 No Form 3 is attached
(Filer engaged in no reportable activity)
 Form 6
 Form 7

FILING PERIOD COVERED (check one):

- This is an original filing for the period _____ through _____.
 This amends form(s) filed on _____ for the period _____ through _____.

Payment Calculation:

- Initial Lobbyist Registration Fee* \$ _____
 \$500 Annual Lobbyist Re-Registration Fee \$ _____
 Initial Client Registration Fee* x Number of Clients (_____) \$ _____
 \$75 Annual Client Re-Registration Fee x Number of Clients (_____) \$ _____
 _____ days late x \$50 Fine \$ _____

Total Payment Due \$ _____

* Please see Lobbyist Manual, page 6, for fee schedule.

I certify under penalty of perjury under the laws of the State of California that the information provided on this Lobbyist Cover Sheet and all accompanying forms is true, complete and correct.

Signature Date

Type or Print Name of Lobbyist

Lobbyist Cover Sheet

07/22/03