

LOBBYIST QUARTERLY REPORT City of Glendale, California
Quarter: 1st (File by April 15) 2nd (File by July 15) 3rd (File by October 15) 4th (File by January 15 of following year)
Year: 20
SECTION 1: Lobbyist information:
I am registered with the City as: Individual Lobbyist Lobbyist Firm
Name: Kodney V. Khan
Name: Rodney V. Khan Firm: Khan Consulting, Inc.
Business/mailing Address: P.O. Box 816, Glendale, CA 9/021
Phone: (818)216-5315
E-mail: KHANCONSULTING@AOL.OM
SECTION 2: Client information for whom you are lobbying (add extra pages if necessary):
Name:
Address:
Phone:
E-mail:
Nature of Business:
Description of Project(s) or Legislation lobbying for:



SECTION 3: Financial Information:

List the amount received or to be received from each client:

Date received/to be Amount received /to be received		If non-monetary compensation, provide description and fair market value.	
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	 // 		
	IV/A		
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List the amount received or to be received from each client:

Date received/to be received	Amount received /to be received	If non-monetary compensation, provide description and fair market value.
	NA	

<u>Total compensation received or promised from each client during this reporting period for lobbying purposes – please provide the name of each client and check the appropriate box for the range:</u>

Client Name	\$0-\$500	\$501-	\$1,001-	\$10,001-	Over
		\$1,000	\$10,000	\$100,000	\$100,000
		1			
	,	1 / 4			
		J/A			
		1			



reporting pe		elating to City of	Giendale Officials	contacted or to be contacted during this
Client:		NA		
Name and T	itle of Official c	ontacted or to be	e contacted:	
			but is not limited t	o in person meetings, remote meetings
Total number	er of contacts o	r anticipated con	itacts:	
1 contact		6-10 contacts	11+ contacts	
Client:		J/A		
Name and T	itle of Official c	ontacted or to be	e contacted:	
			but is not limited t	o in person meetings, remote meetings
Total number	er of contacts o	r anticipated con	itacts:	
		6-10 contacts		
Client:	ſ	VA		
Name and T	itle of Official c	ontacted or to be	e contacted:	
Date(s) cont		ontact (includes,	but is not limited t	o in person meetings, remote meetings
	r	r anticipated cor		
1 contact	2-5 contacts	6-10 contacts	11+ contacts	
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Client:				
Name and Title of Official contacted or to be contacted: Date(s) contacted or will contact (includes, but is not limited to in person meetings, remote meetings and correspondence):				
Total number	er of contacts o	r anticipated con	itacts:	
1 contact	2-5 contacts	6-10 contacts	11+ contacts	
Check here if you do not yet know which City of Glendale Official you will be contacting.				
[_] Check here and attach additional sheets if necessary. Pages from this form may be duplicated and attached as additional sheets.				

[Remainder of page intentionally left blank]



SECTION 5: Lobbyist activity expenses:

Please list payments made by you,	during this reporting period, which	directly benefitted any City			
Official or City Official's immediate	family or domestic partner. Activit	ty expenses do not include			
campaign contributions, however,	they do include gifts, salaries and c	ther forms of compensation to the			
City Official.	\wedge				
Client:					
/					
Name of City Official	Activity Expense paid/incurred	Description of activity (e.g. gift,			
2	by Lobbyist to City Official – please list dollar amount or fair	salary, loan forgiveness, passes, etc.)			
	market value.	etc.)			
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \		L.,			
Client:					
/					
Name of City Official	Activity Expense paid/incurred	Description of activity (e.g. gift,			
	by Lobbyist to City Official – please list dollar amount or fair	salary, loan forgiveness, passes,			
	market value.	etc.)			
-					
		L			
Client:					
Name of City Official	Activity Expense paid/incurred	Description of activity (e.g. gift,			
	by Lobbyist to City Official –	salary, loan forgiveness, passes,			
	please list dollar amount or fair market value.	etc.)			
	market value.				



[_] Check here and attach additional sheets if reporting lobbying activities for more than one client. Pages from this form may be duplicated and attached as additional sheets.

I declare under penalty of perjury, under the laws of the State of California, that the information provided herein is true and correct.

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Signature

Printed Name

Title/Position