



# OKLAHOMA ETHICS COMMISSION

PHONE: (405) 521-3451 • FAX: (405) 521-4905 • WEBSITE: [WWW.OK.GOV/ETHICS](http://WWW.OK.GOV/ETHICS)

## LOBBYIST OR LIAISON EXPENDITURE REPORT

AMENDED:

Full Legal Name (Last, First, Middle)		Ethics Number
Lobbyist or Liaison Type	Reporting Period	Year

- Verification of information on Registration.** I acknowledge that the information contained in my *Lobbyist or Liaison Registration Form* is true and correct as of the date of filing this report and incorporated as a part of this report.
- Other Lobbyist Reporting.** Some, or all, expenditures are reported by another lobbyist or liaison. Schedule 4 is attached identifying the lobbyist(s) or liaison(s) reporting the expenditure(s).
- FINAL REPORT.** This report terminates my lobbyist or liaison registration in the state of Oklahoma. This final report includes all remaining expenditures I am required to report under the laws of Oklahoma. I understand that to engage in lobbying in Oklahoma in the future (including within the same year) I will be required to register.

### Lobbyist or Liaison Expenditures Summary:

Types of Expenditures:	Reporting period total	Year to date total
Meals and Other Food and Beverage for Individuals [Schedule 1]		
Other Gifts for Individuals [Schedule 2]		
<b>Lobbyist or Liaison Reported Expenditures Total:</b>		

### Lobbyist Principal's Expenditures Summary (Note these totals may include multiple lobbyist principals).

Types of Expenditures:	Reporting period total	Year to date total
Events for All Members of the Legislature [Schedule 3]		
Caucus Events [Schedule 3]		
Committee or Subcommittee Events [Schedule 3]		
Conferences, Seminars or Similar Meetings [Schedule 3]		

By signing, electronic or otherwise, my name below, I, the lobbyist or liaison identified on this form, acknowledge that the information submitted is complete, true and accurate, as of the date acknowledged below. I understand the failure to provide such information is a violation of the Ethics Rules of Oklahoma. I further understand that I can correct bona fide oversights or errors by filing an amended report.

\_\_\_\_\_  
Date submitted

\_\_\_\_\_  
Lobbyist or Liaison signature















