

CITY OF OCEANSIDE

FORM L-100

**SCHEDULE E
PAYMENTS RECEIVED**

(Firm) Name: _____

LOBBYIST REGISTRATION FORM

Page _____ of _____

PAYMENTS RECEIVED FROM CITY AGENCY, CITY OFFICIAL, CITY OFFICIAL-ELECT, CONTROLLED COMMITTEES, OFFICEHOLDER COMMITTEES OR BALLOT MEASURE COMMITTEES

Report any payment received for services rendered to any City agency, City official, City official-elect or their controlled committee, any officeholder committee or ballot measure committee

Date Payment Received	Name of City Agency, City Official-elect, or Ballot Measure	Committee Name and ID Number	Amount
Date of Election	Description of Services Provided		

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Date of Election	Description of Services Provided		

SUBTOTAL PAYMENTS RECEIVED: \$ _____

TOTAL PAYMENTS RECEIVED (if final page): \$ _____

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TOTAL PAYMENTS RECEIVED (if final page): \$ _____

Check box if additional Schedule E-payments received pages are attached.