

# NEW YORK STATE COMMISSION ON ETHICS AND LOBBYING IN GOVERNMENT 540 Broadway, Albany NY 12207 LobbyingHelpDesk@ethics.ny.gov

# LOBBYING AGREEMENT FORM EMPLOYED LOBBYISTS

#### WHEN TO USE THIS FORM

In lieu of submitting a copy of a lobbying agreement or contract, a Lobbyist may submit the following Lobbying Agreement Form with a Statement of Registration or Registration Amendment.

SECTION I — CLIENT INFORMATIO	N				
Client Name					
AMENDMENT INFORMATION — ONI	Y complete this section if you are amending the original terms of the agreement form.				
Indicate reason for amendment. Check all th	at apply:				
☐ Adding a Contract	☐ Change in terms (start/end dates)				
☐ Compensation Change					
Add/Remove Individual Lobbyist if	listed in agreement				
Other (Please specify)					
SECTION II — CONTRACT DURATIO	DN*				
Start Date is the first date lobbying activities were authorized to commence. The Termination Date is the last date lobbying activities have been authorized. For month-to-month agreements, the Termination (end) Date that should be listed in the 'Agreement Information' section of the Registration is the end of the current biennial period, unless otherwise specified.					
If entering information due to an <u>AMENDMENT</u> - enter the Start Date that coincides with the amended change, including compensation changes and amendments related to contract extensions - do not enter the original contract Start Date.					
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Start Date/	Termination Date*/				
	☐ Check for month-to-month agreements/authorizations				
SECTION III — COMPENSATION INF	FORMATION**				
Amount and Pay Frequency and/or rate of pay. Only provide the compensation amount related to Lobbying services, do not include compensation related to non-lobbying services. See Section V Addendum on page 3 to enter additional compensation or date ranges.					
Pay Frequency (select one)					
☐ Hourly ☐ Daily	☐ Weekly ☐ Bi-Weekly ☐ Annually				
☐ Monthly ☐ Quarterly	☐ One Time ☐ Range \$to \$				
Compensation Amount \$	☐ Check to indicate exceeding \$5,000 in <u>expenses</u> only				

## SECTION IV —OTHER SERVICES AND SIGNATURES

OTHER SERVICES			
Will other services, in addition to lobbying, be provided by the individuals authorized to lobby	?	☐ YES	□ NO
SIGNATURE			
This form must be signed by the Responsible Party for the lobbying organization.			
SIGNATURE X			
PRINT NAME	DAT	Œ	

#### **NOTES:**

<sup>\*</sup>For month-to-month agreements, the Termination (end) Date that should be listed in the 'Agreement Information' section of the Registration is the end of the current biennial period, unless otherwise specified.

<sup>\*\*</sup> *Regarding Compensation*, the employed Lobbyist(s) prorated salary for Lobbying Activity must be reported.

## SECTION V — ADDENDUM (OPTIONAL)

Enter additional compensation information below, continued from first page. If your employees activity includes varying dates and/or compensation amounts, you must disclose such dates and compensation amounts. Example: Your agreement is effective 1/1/2023 - 12/31/2024 but the compensation in 2023 differs from the compensation in 2024. Indicate each unique compensation and/or duration in a separate box.

#### **Duration/Compensation Amount 1**

• Start Date: 1/1/2023

• Termination Date: 12/31/2023

• Compensation Amount: \$1,000 per month

#### **Duration/Compensation Amount 2**

• Start Date: 1/1/2024

• Termination Date: 12/31/2024

• Compensation Amount: \$500 per month

A. DURATION/COMPENSATION**:							
Amount and Pay Frequency and/or rate of pay. Include Start Date and Termination Date only if dates differ from contract dates given in							
Section I.							
Start Date:/	_/ Termin	ation Date:/	/				
Pay Frequency (select one	.)						
	<u></u>			<b>-</b>			
☐ Hourly	☐ Daily	☐ Weekly	☐ Bi-Weekly	Annually			
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<b>Compensation Amount</b>	\$						
1	<u> </u>						
B. DURATION/COMP	DENICATION**.						
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Amount and Pay Frequen Section I.	cy ana/or rate of pay. Inclu	ae Start Date ana Iermii	iation Date only if aates aif	fer from contract dates given in			
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Pay Frequency (select one	?)						
☐ Hourly	☐ Daily	☐ Weekly	☐ Bi-Weekly	Annually			
_ ,		_ ,	_ /	_ /			
☐ Monthly	Quarterly	One Time	☐ Range \$	to \$			
		$\neg$					
<b>Compensation Amount</b>	\$						
C. DURATION/COMP	PENSATION**:						
Amount and Pay Frequency and/or rate of pay. Include Start Date and Termination Date only if dates differ from contract dates given in							
Section I.	s) s, r s, <b>r</b> ,						
Start Date:/	_/ Termina	ation Date:/	/				
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☐ Monthly	Quarterly	One Time	☐ Range \$	to \$			
r		$\neg$					
Compensation Amount	\$						