

**COUNTY OF SAN JOAQUIN  
LOBBYING COMPLAINT FORM**

To: Clerk of the Board of Supervisors  
44 North San Joaquin Street, Suite 627  
Stockton, CA 95202

The undersigned believes that a violation of San Joaquin County's Lobbyist and Registration Ordinance, Title 7, Division 1, Chapter 7 of the County Code, has occurred. Specifically, the undersigned believes that:

1. The person named below is an unregistered lobbyist, is not properly registered under the San Joaquin County ordinance, and has engaged in lobbying.
2. That at the time, the lobbyist was representing the principal named below. That principal **is / is not** (circle one) registered under the San Joaquin County lobbying ordinance.
3. That the lobbying occurred at a meeting, the nature, date of which, and persons present is also set out below.

The undersigned hereby requests that the County Administrator or his/her designee investigate and determine whether a violation of the San Joaquin County lobbying ordinance has occurred.

<b>Name and Address of Unregistered Lobbyist</b>	
<b>What Group Were They Representing (Principal)</b>	
<b>Nature of Meeting Where Alleged Violation Occurred and Persons Present</b>	
<b>Date of Meeting</b>	
<b>Name and Address of Person Filing Complaint</b>	

Attach additional information if desired.

Signature of Person Filing Complaint

Filing Date

\_\_\_\_\_

\_\_\_\_\_