LEGISLATIVE CONSULTING FEE STATEMENT

Statement Date:

Statement No:

Billing Period:

Lobbyist Reg No:

GOVERNMENT RELATIONS FIRM

CLIENT INFORMATION

DATE	CONSULTANT/LOBBYIST	LEGISLATIVE ACTIVITY / MATTER	HOURS	RATE	AMOUNT

Fees Subtotal:

Disbursements/Expenses:

Total Balance Due:

PAYMENT & COMPLIANCE INSTRUCTIONS

Remit Payment To:

Bank Wire / ACH:

Account / Routing:

Compliance Notes: