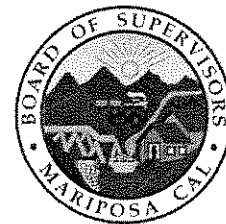




# MARIPOSA COUNTY

Administration · 209-966-3222



## RESOLUTION - ACTION REQUESTED 2012-576

MEETING: November 27, 2012  
TO: The Board of Supervisors  
FROM: Rick Benson, County Administrative Officer  
RE: Lobbying Firm Activity Authorization

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### **RECOMMENDATION AND JUSTIFICATION:**

Authorize the County Administrative Officer to Sign the Lobbying Firm Activity Authorization Form Authorizing Advocation, Inc. To Perform Lobbying Activities on Behalf of Mariposa County. Advocation is required to renew the firm's registration at the beginning of each legislative session, and to obtain the County's authorization to continue its lobbying activities on the County's behalf. Recognizing the financial hardships facing local governments Advocation has been performing lobbying activities at no cost to the County for the last couple of years.

Advocation will be contacting the County in the near future to discuss the County's legislative priorities for the upcoming year.

### **BACKGROUND AND HISTORY OF BOARD ACTIONS:**

The Board has previously authorized the County Administrative Officer to sign the lobbying authorization form.

### **ALTERNATIVES AND CONSEQUENCES OF NEGATIVE ACTION:**

Do not authorize the County Administrative Officer to sign the Authorization Form. Advocation will be unable to perform lobbying activities on behalf of the County, which could lessen legislators learning of the positive or negative impacts legislation will have on the County.

### **FINANCIAL IMPACT:**

None

### **ATTACHMENTS:**

Lobbying Firm Authorization Form 602 (PDF)

### **CAO RECOMMENDATION**

## Resolution - Action Requested 2012-576

Requested Action Recommended

  
Rick Benson, County Administrator/Office

**RESULT:** ADOPTED [UNANIMOUS]  
**MOVER:** Lee Stetson, District I Supervisor  
**SECONDER:** Jim Allen, District V Supervisor  
**AYES:** Stetson, Turpin, Bibby, Cann, Allen

**Lobbying Firm  
Activity Authorization**

(Government Code Section 86104)

Check *one* box, if applicable

**Lobbyist Employer**  
(Gov. Code Section 82039.5)

**Lobbying Coalition**  
(FPPC Regulation 18616.4)

Type or Print in Ink

Legislative Session	<b>CALIFORNIA FORM 602</b> FAIR POLITICAL PRACTICES COMM. For Official Use Only
2013-2014 <small>(Insert Years)</small>	
Page _____ of _____	

NAME OF FILER: County of Mariposa		EFFECTIVE DATE: January 1, 2013
BUSINESS ADDRESS: (Number and Street)	(City)	(State)
5100 Bullion Street, Mariopsa, CA 95338		TELEPHONE NUMBER: ( 209 ) 966-3222
MAILING ADDRESS: (If different than above.)		FAX NUMBER: (Optional) ( )
P.O. Box 784, Mariposa, CA 95338		E-MAIL: (Optional)

I hereby authorize Advocation, Inc.  
(Name of Lobbying Firm)  
1415 L Street, Suite 1000, Sacramento, CA 95814  
(Business Address)

to engage in the activities of a lobbying firm (as defined in California Government Code Section 82038.5 and 2 Cal. Code of Regs. Section 18238.5) on behalf of the above named employer.

If you are authorizing another lobbying firm to lobby on behalf of your firm's client(s), provide the name(s) of the client(s) below. (It is not necessary to complete the Nature and Interests section.)

NAME OF SUB CONTRACTED CLIENT:	NAME OF SUB CONTRACTED CLIENT:
NAME OF SUB CONTRACTED CLIENT:	NAME OF SUB CONTRACTED CLIENT:

**VERIFICATION**

I have used all reasonable diligence in preparing this Statement. I have reviewed this Statement and to the best of my knowledge the information contained herein is true and complete.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 11-27-12  
DATE

By Richard J. Benson  
SIGNATURE OF RESPONSIBLE OFFICER

Name of Responsible Officer Richard J. Benson  
PRINT OR TYPE

Title County Administrative Officer

# Lobbying Firm Activity Authorization

SEE INSTRUCTIONS ON REVERSE

Type or Print in Ink

NAME OF FILER:

County of Mariposa

## Nature and Interests of Lobbyist Employer

Check *one* box only:

- INDIVIDUAL (Complete only Parts A and E)       BUSINESS ENTITY (Complete only Parts B and E)       INDUSTRY, TRADE OR PROFESSIONAL ASSN. (Complete only Parts C and E)       OTHER (e.g., lobbying coalition) (Complete only Parts D and E)

### A. Individual

1. Name and address of employer (or principal place of business if self-employed):

2. Description of business activity in which you or your employer are engaged:

### B. Business Entity

Description of business activity in which engaged:

### C. Industry, Trade or Professional Association

1. Description of industry, trade or profession represented:

2. Specific description of any portion or faction of the industry, trade, or profession which the association exclusively or primarily represents:

3. Number of members in association (*check appropriate box*)

- 50 OR LESS (provide names of all members on an attachment.)       MORE THAN 50

### D. Other

1. Statement of nature and purposes:

government

2. Description of any trade, profession, or other group with a common economic interest which is principally represented or from which membership or financial support is principally derived:

local county government

### E. Industry Group Classification

Check one box which most accurately describes the industry group which you represent. See instructions on reverse.

- |  |   |  |   |
|--|---|--|---|
| <input type="checkbox"/> AGRICULTURE           | <input type="checkbox"/> LEGAL                                | <i>BUSINESS (Check one of the following sub-categories.)</i> |   |
| <input type="checkbox"/> EDUCATION             | <input type="checkbox"/> PUBLIC EMPLOYEES                     | <input type="checkbox"/> ENTERTAINMENT/RECREATION            | <input type="checkbox"/> OIL AND GAS  |
| <input checked="" type="checkbox"/> GOVERNMENT | <input type="checkbox"/> POLITICAL ORGANIZATIONS              | <input type="checkbox"/> FINANCE/INSURANCE                   | <input type="checkbox"/> PROFESSIONAL/TRADE                                       |
| <input type="checkbox"/> HEALTH                | <input type="checkbox"/> UTILITIES                            | <input type="checkbox"/> LODGING/RESTAURANTS                 | <input type="checkbox"/> REAL ESTATE  |
| <input type="checkbox"/> LABOR UNIONS          | <input type="checkbox"/> OTHER: _____<br>(Describe in detail) | <input type="checkbox"/> MANUFACTURING/INDUSTRIAL            | <input type="checkbox"/> TRANSPORTATION   |
|  |   | <input type="checkbox"/> MERCHANDISE/RETAIL                  | <input type="checkbox"/> OTHER: <u>express delivery</u><br>(Specific Description) |