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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration ☐

1. Effective Date of Registration 5-20-07

2. House Identification Number _____ Senate Identification Number _____

REGISTRANT

3. Registrant name BETH LABASKY

Address 300 W. Pensacola St. Ste 118H

City Tallahassee State FLA Zip 32309

4. Principal place of business (if different from line 3)

City _____ State/Zip (or Country) _____

5. Telephone number and contact name

850 322 7335 Contact Beth Labasky E-mail (optional) bethlabasky@aol.com

6. General description of registrant's business or activities

CLIENT A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should check ☐ Self labeled "Self" and proceed to line 10.

7. Client name The City of Daytona Beach

Address 301 South ~~200~~ Ridgewood Ave

City Daytona Beach State FLA Zip 32114

8. Principal place of business (if different from line 7)

City _____ State/Zip (or Country) _____

9. General description of client's business or activities

city government

LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
<u>Beth Labasky</u>	

3000062621

Form LD-1 (Rev. 04/03)

Registrant Name

Beth LABASKY

Client Name

City of Daytona

LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1, page

GOV

12. Specific lobbying issues (current and anticipated)

city government legislation

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant during a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying activities?

☒ No → Go to line 14.

☐ Yes ↓ Complete the rest of this section for each entity matching criteria above, then proceed to line 14.

Name	Address	Principal Place of Business (city and state or country)

FOREIGN ENTITIES

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; **OR**
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsidizes activities of the client or any organization identified on line 13; **OR**
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the outcome of the lobbying activity?

☒ No → Sign and date the registration.

☐ Yes ↓ Complete the rest of this section for each entity matching the criteria above, then sign and date the registration.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	C P I

Beth Labasky

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Signature [Signature] Date 6-10-11

Printed Name and Title BETH LABASKY

Form LD-1 (Rev. 04/03)