

**Lobbyist Certification Statement**

(Government Code Section 86103)

<b>Legislative Session</b>		<b>CALIFORNIA FORM 604</b> <small>FAIR POLITICAL PRACTICES COMM.</small> For Official Use Only <b>AMENDMENT 001</b>
2015	2016	
(Insert Years)		

Type or Print in Ink

Check Box if an Amendment

NAME OF LOBBYIST: (Last) SARKISSIAN	(First) KAREN	(M.I.)	If this is an Initial Certification, enter the DATE QUALIFIED as a Lobbyist: <b>07/18/2016</b>
BUSINESS ADDRESS: (Number and Street)	(City) SACRAMENTO	(State) CA	(Zip Code) 95814
MAILING ADDRESS: (If different than above)	SACRAMENTO	CA	95812
NAME OF LOBBYIST EMPLOYER OR LOBBYING FIRM: California Chamber of Commerce			TELEPHONE NUMBER: FAX NUMBER: (Optional) 9163251272 E-MAIL: (Optional) KAREN.SARKISSIAN@CALCHAM

**I. LOBBYIST ETHICS ORIENTATION COURSE**

Check one box:

- I have not taken the course within the previous 12 months. I will attend the course (check one):
  - New Certification - Within the next 12 months
  - Renewal - By June 30 of the next calendar year
- I completed the course on 11/17/2016 (Mo./Day/Year)

**II. AGENCIES LOBBIED**

Check one box:

- I will lobby the agencies identified on the Lobbyist Employer or Lobbying Firm Registration Statement (Form 601/603) and subsequent amendments.
- I will only lobby the agencies identified below:

Will you lobby the State Legislature? State Agencies: \_\_\_\_\_

Yes       No

\_\_\_\_\_

**III. LOBBYIST RESTRICTIONS**

By signing the verification below, I certify that I have read and understand that I am subject to the prohibitions contained in Government Code Sections 86203 and 86205. (Provided on reverse.)

**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 11/18/2016 DATE

By KAREN SARKISSIAN SIGNATURE OF LOBBYIST