## **DISCLOSURE OF LOBBYING ACTIVITIES**

Complete this form to disclose lobbying activities pursuant to 31 U.S.C.1352

OMB Number: 4040-0013 Expiration Date: 02/28/2025

1. * Type of Federal Action:	2. * Status of Federal Action:	3. * Report Type:
a. contract	a. bid/offer/application	a. initial filing
b. grant	b. initial award	b. material change
c. cooperative agreement d. loan	c. post-award	
e. loan guarantee		
f. loan insurance		
4. Name and Address of Reporting	Entity:	
Prime SubAwardee		
*Name San Bernardino County		
* Street 1 385 N Arrowhead Avenue	Street 2	
* City San Bernardino	State CA: California	Zip 92415-0123
Congressional District, if known:		
5. If Reporting Entity in No.4 is Subawardee, Enter Name and Address of Prime:		
6. * Federal Department/Agency:	7. * Federal Pro	gram Name/Description:
US Department of Justice OJP BJA	Edward Byrne Memorial Justice Assistance Grant Program	
CFDA Number, if applicable: 16.738		
8. Federal Action Number, if known:  9. Award Amount, if known:		
o. i ederal Action Humber, ii known.	s F	909,431.00
		303,131.00
10. a. Name and Address of Lobbying Registrant:		
Prefix *First Name dba Middle Name		
*Last Name Potomac Partners DC, LLC Suffix		
* Street 1 Street 2		
700 Pennsylvania Avenue SE  * City	State	Zip Occasional
Washington	DC: District of Columbia	20003-2493
b. Individual Performing Services (including address if different from No. 10a)		
Prefix * First Name Richard	Middle Name	
*Last Name Alcalde	Suffix	
*Street 1 700 Pennsylvania Avenue SE	Street 2	
* City Washington	State DC: District of Columbia	Zip 20003-2493
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when the transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than		
\$10,000 and not more than \$100,000 for each such failure.		
* Signature: Completed on submission to Gran		Maria
*Name: Prefix *First Nam	Luther Middle	vame
* Last Name	S	uffix
Title: County Chief Operating Officer/Acting CEO  Telephone No.: 909-387-5425  Date: Completed on submission to Grants.gov		
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