



**THE PRINCE GEORGE'S COUNTY GOVERNMENT
OFFICE OF ETHICS AND ACCOUNTABILITY
LOBBYIST ANNUAL REPORT**

REPORTING PERIOD: January, 01 2016, through December, 31 2016

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Contact Information

| | |
|-----------------------------------|---|
| Name Darrell Carrington | Email darrell555@yahoo.com |
| Phone (732) 763-7398 | Address 6007 Hillmeade Road Bowie, Maryland 20720 United States |

Reporting Period

| | |
|---|---|
| Reporting Period Start Date 1/1/2016 | Reporting Period End Date 12/31/2016 |
|---|---|

Lobbyist Information

Firm/Individual?
Individual

If the registrant is a firm, identify all persons from the firm who represented the employer in the subject matters

J. Darrell Carrington

The employer is to be exempt from lobbyist registration and reporting because all expenditures requiring registration are reported by the registrant alone or with other registrants.

Yes

Lobbying Matters
Environmental Issues

Lobbyist Employer Information

| | |
|-----------------------------------|--|
| Employer's Name Tim Whitehouse | Employer's Title Executive Director |
|-----------------------------------|--|

Employer's Company Name
Chesapeake Physicians for Social Responsibility

| | |
|------------------------------------|---|
| Employer's Phone (240) 246-4492 | Employer's Email twhitehouse@psr.org |
|------------------------------------|---|

Employer's Address
325 East 25th Street
Baltimore, MD 21218

Employer's Nature of Business
Environmental and Public Health

| | |
|------------------------------------|-----------------------------------|
| Employment Start Date 1/11/2016 | Employment End Date 12/31/2016 |
|------------------------------------|-----------------------------------|

Compensation and Expenses

Do you have any reportable compensation or expenses during the reporting period?

Yes

Expenditures A - Compensation(\$)
\$8,000.00

Expenditures B - Expenses(\$)
\$0.00

Expenditures C - Research and Assistance (\$)
\$0.00

Expenditures D - Publications(\$)
\$0.00

Expenditures E - Paid to witnesses(\$)
\$0.00

Expenditures F - Meals and beverages(\$)
\$0.00

Expenditures G - Special events(\$)
\$0.00

Expenditures H - Meetings(\$)
\$0.00

Expenditures I - Other gifts(\$)
\$0.00

Expenditures J - Other expenses(\$)
\$0.00

List of Beneficiaries**Electronic Signature**



"I solemnly swear or affirm under the penalties of perjury that the contents of this report, including any attachments, are complete, true and correct to the best of my knowledge, information, and belief. I further agree that my use of a computer, key pad, mouse or other electronic device to sign and or submit this document constitutes my signature as if actually signed by me, is the legal equivalent of my manual signature, and constitutes my certification that the statements herein are true and accurate."

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