



LOBBYIST CLIENT IDENTIFICATION FORM

LOBBYIST/REGISTRANT NAME: Jackson Walker LLP

FILING DATE: 05/02/16

SECTION I. BASIC GUIDELINES

The Irving Ethics Code requires persons or entities who engage in lobbying Irving City Officials to separately register with the City Secretary for each client. This form should be filed either with the Lobbyist Registration Form or as soon as new clients are engaged. Lobbyist Client Identification Forms will be included in the Lobbyist Registrations on file with the City Secretary's Office.

SECTION II. LOBBYIST'S CLIENT INFORMATION

Client's Name: Pioneer Natural Resources USA, Inc.

Address: 5205 N. O'Connor Blvd., Suite 200

City: Dallas State: TX Zip Code: 75039

E-mail: danny.barker@pxd.com Telephone:

Form of Client's Business:

Individual Corporation Partnership Other

If other, describe:

Subject matter(s) of lobbying efforts: Tax Abatement Agreement

SECTION III. SIGNATURE AND ACKNOWLEDGMENT

JACKSON WALKER LLP
BY: 
SIGNATURE, LOBBYIST/REGISTRANT

Jackson Walker LLP
Printed Name

Partner

Position

(Acknowledgment on Page 2)

ENTITY ACKNOWLEDGMENT

STATE OF TEXAS §

§

COUNTY OF DALLAS §

BEFORE ME, the undersigned authority, a Notary Public in and for said County and State, on this day personally appeared:

Steven R. Jenkins

Partner

(Print Name)

(Print Title)

of JACKSON WALKER LLP, a corporation, partnership or other entity, known to me to be the person and officer whose name is subscribed to the foregoing instrument and acknowledged to me that the same was the act of the said corporation, partnership or other entity, that he/she was duly authorized to perform the same by appropriate resolution of the board of directors of such entity and that he/she executed the same as the act of such corporation for the purposes and consideration therein expressed, and in the capacity therein stated.

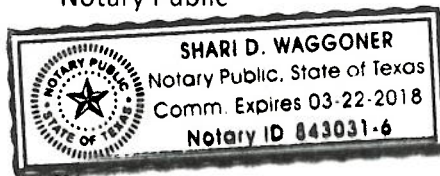
GIVEN UNDER MY HAND AND SEAL OF OFFICE this the 2nd day of May, 2016.

Shari D. Waggoner

Notary Public

My Commission Expires:

03-22-2018



SINGLE ACKNOWLEDGMENT

STATE OF _____ §

§

COUNTY OF _____ §

On this day personally appeared _____ before me, the undersigned authority, a Notary Public in and for said County and State, and known to me to be the person whose name is subscribed to the foregoing instrument, and acknowledged to me that he/she executed the same for the purposes and consideration therein expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE this the _____ day of _____, 20____.

Notary Public

My Commission Expires:
