

**LOBBYIST REGISTRATION FORM ---- 2017**

1. Name, business address, telephone number, and fax of the **lobbyist**:
  
2. Names, business addresses, and telephone numbers of **others** who will act on this lobbyist's behalf:
  
3. Name, business address, telephone number, and fax of the **employer** on whose behalf the lobbyist acts. **Note:** If a previously filed Employer Authorization has expired, a new Employer Authorization form must be filed by this employer along with this Registration form. Also, a separate Registration and Authorization form must be filed for each employer, if more than one exists.
  
4. Describe the **employer's** business:
  
5. Identify the **subject matter**(s) on which the lobbyist expects to represent this employer, including the formal designation of any proposed legislation, if known.
  
6. I will **terminate** all lobbying activities for this client on or before: \_\_\_\_\_, 2017.

(over)

7. I solemnly swear or affirm under the penalties of perjury that the contents of this report, including any attachments thereto, are complete, true, and correct to the best of my knowledge, information, and belief.

Signature of Lobbyist: \_\_\_\_\_

Date: \_\_\_\_\_

Sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Signature of Notary Public: \_\_\_\_\_

Printed Name: \_\_\_\_\_

Expiration Date: \_\_\_\_\_

[Seal]