



LOBBYIST REGISTRATION AFFIDAVIT

1. Lobbyist Name: _____
Last Name First Middle

Lobbyist Phone: (_____) _____

Lobbyist Address: _____
Street City State Zip

2. Principal Represented: _____

Principal Address: _____
Street City State Zip

Other Principals or Interests and Address (Detail):

3. Specific Issue on which the Lobbyist has been retained (Describe in Detail):

Lobbyist specifically includes principal as well as any agent, officer, or employee of a principal. Each person who withdraws as a lobbyist is required to file a Certificate of Withdrawal.

4. Registration Fee paid? NO____ YES____ (Cash____ or Check____)

5. Please identify all Council People or Personnel to be lobbied:

6. The subject matter in number (3) above is to be considered at which meeting? (Check all applicable)

City Council _____
Zoning Board of Adjustment _____
Planning Commission _____
City Board _____
RFP Review/Selection Committee _____
Others (Specify) _____

7. Please state the extent of any business, financial, familial, and professional or other relationship which exists with any individual identified in number (5) above.

OATH

STATE OF FLORIDA)

COUNTY OF MIAMI-DADE)

I, the undersigned registrant, do hereby depose under oath and say that the information disclosed and any attachments are true and correct.

Signature

Sworn to and subscribed before me this _____ day of _____, 20_____.

Notary Public

My Commission Expires: _____