SECRETARY KATIE HOBBS

LOBBYIST - PRINCIPAL - PUBLIC BODY

ADD OR REMOVE LOBBYISTS & EMPLOYEES

PLEASE SUBMIT VIA EMAIL TO LOBBYIST@AZSOS.GOV

ENTITY TYPE: SELECT ONE

NAME

ID NUMBER

SELECT ONE ADD

NAME OF LOBBYIST OR EMPLOYEE OF LOBBYING FIRM

ID NUMBER (IF AVAILABLE)

E-MAIL ADDRESS

PHONE NUMBER

BUSINESS ADDRESS

CITY

STATE

ZIP CODE

TYPE OF LOBBYIST (CHECK ONLY ONE)

☐ Lobbyist for Compensation ☐ Authorized Lobbyist ☐ Authorized Public Lobbyist ☐ Employee of _____ (Lobbying Firm)

EXPENSES FOR WHICH LOBBYIST IS TO BE REIMBURSED (describe)

SELECT ONE ADD

NAME OF LOBBYIST OR EMPLOYEE OF LOBBYING FIRM

ID NUMBER (IF AVAILABLE)

E-MAIL ADDRESS

PHONE NUMBER

BUSINESS ADDRESS

CITY

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EXPENSES FOR WHICH LOBBYIST IS TO BE REIMBURSED (describe)

By signing, I declare under penalty of perjury that the information provided on this form is true, complete, and correct.

Name of Designated Lobbyist/Lobbyist for Compensation

/S/ _____

Conformed Signature of Designated Lobbyist/Lobbyist for Compensation