



State of Arizona

**PRINCIPAL/PUBLIC BODY REGISTRATION**

**Initial/Renewal Application for Lobbying**

**File with: Arizona Secretary of State**

Attention: Election Services Division

1700 W. Washington Street, 7th Fl., Phoenix, AZ 85007

(602) 542-8683 (800) 458-5842 (within Arizona)

Website: www.azsos.gov

Check One

Please fill out both sides of this form. File this form between Dec. 1 of every even-numbered year through the second Monday of January of every odd-numbered year.

INITIAL  
 RENEWAL

FOR OFFICE USE ONLY – REV. 01/18/19

**PRINCIPAL/PUBLIC BODY REGISTRATION ~ A.R.S. §§ 41-1232 AND 41-1232.01**

Please type or print clearly.

**NOTICE:** A Principal/Public Body must file an **amended registration** reporting any change in the information prescribed on this form within five business days. See A.R.S. § 41-1232(C). Use Amendment Form to file an amended registration.

Check One:  PRINCIPAL  PUBLIC BODY

P/PB ID NUMBER		E-Mail Address of Contact Person	
NAME OF PRINCIPAL/PUBLIC BODY		BUSINESS TELEPHONE	BUSINESS FAX
BUSINESS ADDRESS	CITY	STATE	ZIP CODE
DESIGNATED LOBBYIST/DESIGNATED PUBLIC LOBBYIST		BUSINESS TELEPHONE	E-MAIL ADDRESS
BUSINESS ADDRESS	CITY	STATE	ZIP CODE

**PRINCIPALS ONLY**

- Please explain the nature of the primary business or activity, issue, interest, or purpose of the principal:

\_\_\_\_\_

- Term of engagement of designated lobbyist:  Indefinite  
 From \_\_\_\_\_ to \_\_\_\_\_ \*

- List the state entities the lobbyist *has been engaged or designated by the principal to lobby*, including the legislature and state agencies, boards, commissions or councils (or attach list if necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PRINCIPALS AND PUBLIC BODIES**

- Expenses for which designated lobbyist/designated public lobbyist is to be reimbursed:

(Check all that apply)

- Meals  Lodging  
 Travel  Out of Pocket Expenses  
 Other (Please describe) \_\_\_\_\_

\* The Principal is responsible for filing all required reports until termination papers are filed with the Secretary of State.



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**YOUR REGISTRATION CANNOT BE ACCEPTED WITHOUT THE FOLLOWING DOCUMENTS**

- **Current list of Lobbyists for Compensation, Authorized Lobbyist and Employees who are retained or represent the Principal/Public Body.**
- **\$25.00 check (payable to Arizona Secretary of State)**

STATE OF \_\_\_\_\_ )  
 )  
 COUNTY OF \_\_\_\_\_ ) ss

I, the undersigned, being duly sworn state that this **Principal/Public Body Registration** is complete, and that to the best of my knowledge and belief the information above is true and correct.

\_\_\_\_\_  
Printed Name of Designated Lobbyist/Designated Public Lobbyist

\_\_\_\_\_  
Signature of Designated Lobbyist/Designated Public Lobbyist

**SUBSCRIBED AND SWORN TO (Affirmed)** before me on the \_\_\_\_ of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_  
My Commission Expires

\_\_\_\_\_  
Notary Public

(affix seal)