



**CITY OF
TALLAHASSEE**

REMOVE LOBBYIST(S)

NAME OF LOBBYIST FIRM _____ DATE _____

Remove the below lobbyist(s) who have ceased lobbying the City of Tallahassee.

1. FIRST NAME _____ MI _____ LAST NAME _____

DATE CEASED LOBBYING: _____

2. FIRST NAME _____ MI _____ LAST NAME _____

DATE CEASED LOBBYING: _____

3. FIRST NAME _____ MI _____ LAST NAME _____

DATE CEASED LOBBYING: _____

4. FIRST NAME _____ MI _____ LAST NAME _____

DATE CEASED LOBBYING: _____

5. FIRST NAME _____ MI _____ LAST NAME _____

DATE CEASED LOBBYING: _____

OATH

Under penalties of perjury, I declare that I have read the foregoing document and that the facts stated in it are true.

Signature

Printed Name

Title

Date

SCANNED FORMS MAY BE EMAILED TO RECORDS@TALGOV.COM

For Official Use Only

CITY OF TALLAHASSEE OFFICE OF THE TREASURER-CLERK ATTENTION: LOBBYIST REGISTRATION / BOX A-31 300 S. ADAMS STREET TALLAHASSEE, FLORIDA 32301	Registration No. _____
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