

**THE METROPOLITAN GOVERNMENT OF NASHVILLE AND DAVIDSON COUNTY
LOBBYIST REGISTRATION**

LOBBYIST NAME _____ DATE
REGISTRATION SUBMITTED _____

LOBBYIST MAILING ADDRESS _____

PHONE _____ FAX _____ EMAIL ADDRESS _____

NAME OF CLIENT _____

NATURE OF CLIENT'S BUSINESS _____

NAME/TITLE OF CLIENT REPRESENTATIVE _____

CLIENT ADDRESS _____

CLIENT PHONE _____ FAX _____

IS LOBBYIST'S FEE CONTINGENT UPON SUCCESS? _____ YES _____ NO

IF YES, IS EMPLOYMENT AGREEMENT IN WRITING? _____ YES _____ NO

LIST GENERAL CATEGORIES OF SUBJECT MATTER ON WHICH REGISTRANT WILL LOBBY

I do solemnly swear that the information contained in this statement is true and that I have complied with all requirements of the Lobbyist Registration and Disclosure Law.

CLIENT INFORMATION: The Lobbyist's Client must sign below or attach a letter on the Client's letterhead that authorizes the Lobbyist to lobby on the Client's behalf.

I do solemnly swear that the information contained in this statement is true and that I have authorized the above-named person to be a lobbyist on my behalf. I understand that I may be responsible for filing a lobbying activities report should the lobbyist fail to file reports required under the Lobbyist Registration and Disclosure Law.

Signature of Client

Mail or submit in-person completed form and related attachment, if applicable, and \$50.00 registration fee to:

Metropolitan Clerk's Office
1 Public Square, Suite 205
Nashville TN 37201
metro.clerk@nashville.gov