

**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 (IF AVAILABLE) _____

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.

Sworn to and subscribed before me, by
_____, Registered Lobbyist,
this ____ day of _____, _____.

Notary Public

My Commission expires: _____

Signature of Registered Lobbyist

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.

Sworn to and subscribed before me, by
_____, Client,
this ____ day of _____, _____.

Notary Public

My Commission expires: _____

Signature of Client