## REGISTRATION BEFORE COUNTY COMMITTEE

Committee Name:	Nan	ne:
DATE of Meeting:	Municipality:	
Petition/CUP #/Resolution/Ordin	ance Amendment/Subje	ct:
☐ Wish to Spe	eak in Support	Wish to Speak in Opposition
☐ Wish to Regis	gister in Support	Wish to Register in Opposition
		Available for Information Only
		zation or a person other than yourself?  YES NO est of the form. If you checked "YES" go to the next question.)
Name, address and telephone num	nber of each person or org	anization you are representing:
COMMENTS:		
2. Are you being paid for your r	epresentation or appear	ing incidental to your other paid duties for this
•		d to complete the rest of this form. If you checked "YES",
3. Are you an elected official wl	no is appearing solely or	n behalf of your office or for your municipality or
_		ed to complete the rest of this form. If you checked "YES",
4. Has or will the person or orga	anization you represent	spend more than \$500 on county lobbying activities
during the current reporting peri	od? (A reporting period is	is January to June, or July to December.) $\square$ YES $\square$ NO
•		th the County Board supervisors other than at public
		o represents the district in which you reside.)
if you do make more than 2 contac	ts at a later date, you mus	I do not need to complete the rest of this form. <u>However</u> , it then contact the County Clerk's office to file a form ion, please continue to the question below. You must also
		nd that if the person or organization you represent od, you must file a financial disclosure statement
		YES NO
(If you checked "NO" please call the Blvd., Room 106A for more information.		21 or go to the Clerk's office at 210 Martin Luther King Jr.,
Date:	Sign	ature:
	Print	Name: