



Dallas County, Texas Lobbyist Registration Form

It is requested that any individual, firm, corporation, association, or group that receives compensation in an amount of at least \$200 per calendar quarter that is paid, received, reimbursed in the past, present, or future in return for or in connection with providing lobbying services or makes an expenditure, excluding one's own travel, food, or lodging expenses in an amount of at least \$200 per calendar quarter in association with the provision of lobbying services complete this Lobbyist Registration Form and submit it to the Dallas County Administrator, 500 Elm, Suite 3100 floor, Dallas, Texas, 75202.

Each time said individual, firm, corporation, association, or group either represents a different client or becomes involved with a different County issue or subject, it shall update and submit a new Form.

Unpaid volunteers, individuals representing only themselves, media representatives on matters of general public interest, and governmental entities desiring to discuss matters related to their own governmental interest are not asked to submit such Forms.

Lobbyist Information: Individual Entity/Firm

Name of Lobbyist: _____
Title: _____
Organization: _____
Address: _____
City/State: _____ Zip Code: _____
Telephone: _____ Fax: _____
Email _____
Address: _____
Web Address: _____

TO THE BEST OF MY KNOWLEDGE, THE INFORMATION PROVIDED IN THIS FORM AND THE ATTACHMENTS IS TRUE AND CORRECT.

Signature of Applicant

STATE OF TEXAS §

COUNTY OF DALLAS §

Sworn to and subscribed before me, by _____
this _____ day of _____ 20 ____ .

Signature of Notary



Dallas County, Texas
Lobbyist Registration Form
SCHEDULE A

Please complete a separate Schedule A for each party for whom you are providing compensated lobbying services.

Name of Party: _____
Party's Address: _____

Contact Person: _____
Contact Telephone: _____
Contact Email Address: _____
Web Address: _____

Nature of Party's Business:

Type of Compensation received by Lobbyist from Lobby Employer:

Direct payment or reimbursement Will receive a salary
 Contingent fee arrangement Other _____

Lobbying Subject Matter:

<input type="checkbox"/> Bonds/Bonds Issuance	<input type="checkbox"/> Legal
<input type="checkbox"/> Capital Improvement Projects	<input type="checkbox"/> Labor/Wages
<input type="checkbox"/> Civil Service	<input type="checkbox"/> Law Enforcement
<input type="checkbox"/> Community Development	<input type="checkbox"/> Mental Health
<input type="checkbox"/> Construction	<input type="checkbox"/> Military/Veterans
<input type="checkbox"/> County Budget/Finance	<input type="checkbox"/> Open Records/Meetings
<input type="checkbox"/> District or County Courts	<input type="checkbox"/> Parkland Hospital
<input type="checkbox"/> Economic Development	<input type="checkbox"/> Parks/Trails
<input type="checkbox"/> Elections	<input type="checkbox"/> Purchasing
<input type="checkbox"/> Ethics	<input type="checkbox"/> Real Property
<input type="checkbox"/> Fees/Revenue	<input type="checkbox"/> Risk Pool
<input type="checkbox"/> Financial Institutions/	<input type="checkbox"/> Health/Human Services
<input type="checkbox"/> Health Insurance/Healthcare	<input type="checkbox"/> Subdivisions
<input type="checkbox"/> Historic Preservation	<input type="checkbox"/> Transportation
<input type="checkbox"/> IT/Communications	<input type="checkbox"/> Other _____