

For Internal Office Use only

Ref. # \_\_\_\_\_

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Date \_\_\_\_\_

# County of San Joaquin

## Individual Lobbyist Registration Statement Form

New Registration \$75     Annual Registration \$50

### Section I: Registering County Lobbyist

Full Name: \_\_\_\_\_  
                                    *Last*                                    *First*                                    *M.I.*

Business Address: \_\_\_\_\_  
                                    *Street Address*  
\_\_\_\_\_  
                                    *City, State, Zip Code*

Business Phone: \_\_\_\_\_ Business Email: \_\_\_\_\_

### Section II: Lobbyist Representing (List all individuals you represent)

| Name of Individual or Firm Represented | Business Address | Telephone Number | Email Address | Effective Date |
|--|------------------|------------------|---------------|----------------|
| 1.                                     |                  |                  |               |                |
| 2.                                     |                  |                  |               |                |
| 3.                                     |                  |                  |               |                |
| 4.                                     |                  |                  |               |                |
| 5.                                     |                  |                  |               |                |

### Section III: Submit

Once the form has been completed, please print, sign, and include a check. Make check payable to: **County of San Joaquin**

Mail or Deliver in Person to:  
Clerk of the Board  
Attn.: County Lobbyist Registration  
44 N. San Joaquin Street, Suite 627  
Stockton, California 95202

Contact:  
Telephone: (209) 468-2350  
Email: lobbyistforms@sjgov.org

Signature: \_\_\_\_\_

Date: \_\_\_\_\_