



Office of the Town Clerk  
7777 NW 72<sup>nd</sup> Avenue  
Medley, Florida 33166  
(305) 887-9541 Ext. 112

Page 1 of 2

Reporting Period: \_\_\_\_\_

Lobbyist Name: \_\_\_\_\_

Lobbyist Address: \_\_\_\_\_

Lobbyist Contact: \_\_\_\_\_

<u>Person Lobbied</u>	<u>Date</u>	<u>Expense Description</u>	<u>Amount</u>
1.			
2.			
3.			
4.			
5.			
6.			

Note: Please attach separate page if additional space is needed.

Separate page attached? \_\_\_\_ Yes \_\_\_\_ No If so, how many pages ? \_\_\_\_



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Page 2 of 2

## Oath

I do solemnly swear that all facts contained on this Annual Lobbyist Expenditure Report are true and correct; and that I have read and am familiar with the provisions contained in Section 2-11.1(s) of the Code of Miami-Dade County adopted by the Town of Medley, Ordinance C-393.

\_\_\_\_\_  
Lobbyist's Signature

\_\_\_\_\_  
Date

State of \_\_\_\_\_

County of \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

(Notary Seal)