



Office of the Town Clerk

7777 NW 72nd Avenue
Medley, Florida 33166
(305) 887-9541 Ext. 112

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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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 by means of Physical Presence or Online Notarization this ____ day of _____, 20____. By _____ who is personally known to me of produced identification.

Type of Identification Produced _____.

Notary Public

(Notary Seal)