

**LOBBYING DISCLOSURE  
QUARTERLY EXPENSE REPORT/  
AMENDED QUARTERLY EXPENSE REPORT  
(Please Print or Type)**

**08 IDENTIFICATION OF LOBBYIST(S)/LOBBYING FIRM(S) LOBBYING ON PRINCIPAL'S BEHALF**

(To be completed by Principal only):

Last Name  First Name  MI

Lobbying Firm Name:

Permanent Business Address:

Address

City  State  ZIP  Registration No:

Daytime Telephone  Fax #

[Format (xxx) xxx-xxxx]

[Format (xxx) xxx-xxxx]

Email Address

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