

Lobbyist Registration Application

Georgia Government Transparency and Campaign Finance Commission

200 Piedmont Avenue, Suite 1402 West Tower | Atlanta, GA 30334
404-463-1980 | www.ethics.ga.gov

AS OF 2011 : Registration fees for lobbyists are increased to \$300. Additionally, lobbyists must pay a \$20 badge fee and a \$10 supplemental registration fee for each additional client represented.

Registration Year _____	Type of Registration ORIGINAL AMENDMENT (If amendment describe) _____ _____
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Lobbyist Identification

Name (Last)	(First)	(Middle)
_____	_____	_____
First name for badge:	Email Address (Optional):	
_____	_____	
Mailing Address (Street)	(Suite)	
_____	_____	
City	State	Zip
_____	_____	_____
Contact Phone	Are you an employee of a City or County:	Yes No
_____	_____	_____

Lobbying on Behalf Of

Name	_____
Mailing Address (Street)	(Suite)
_____	_____
City	State Zip
_____	_____
Phone	_____

Type of Lobbying (Check all that apply):	State	State Agency	Local (City/County)	Vendor
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Has the above individual or entity agreed to pay the Lobbyist an amount exceeding \$10,000.00 in a calendar year for lobbying activities?	Yes No
General Business or Purpose of Party Lobbied For: _____	

Name of state agency or agencies which applicant will lobby: _____

If applicant represents a **membership group** other than an agency or corporation state the approximate **number of members**: _____

Do You Serve As A Lobbyist For More Than One Organization? Yes No

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Lobbyist Felony Verification

State of _____ County of _____

LOBBYIST:

I, verify that I have not been convicted of a felony involving moral turpitude in the courts of Georgia or an offense that, had it occurred in Georgia, would constitute a felony involving moral turpitude under the laws of Georgia.

NOTE:

If the applicant has been so convicted, the applicant must attach a statement identifying such conviction, the date thereof, a copy of person's sentence, and a statement that more than ten years has elapsed since the completion of the applicant's sentence.

SIGNATURE OF LOBBYIST:

NOTARY PUBLIC (Sign Name):

PRINT NOTARY'S NAME:

My Commission Expires:

This document was sworn to or affirmed and subscribed before me on: _____, 20

Verification by Oath or Affirmation

State of _____ County of _____

LOBBYIST: I, the undersigned lobbyist, do hereby swear or affirm that the information in this application is complete, true, and correct to the best of my knowledge and belief, and that I am in full compliance with the Ethics in Government Act*. I affirm that any lobbyist report I submit electronically in the future shall be complete, true, and correct to the best of my knowledge and belief.

SIGNATURE OF LOBBYIST

NOTARY PUBLIC (Signature)

NOTARY PUBLIC (Print Name)

My Commission Expires

This document was sworn to or affirmed and subscribed before me on: _____, 20

Authorization

I hereby authorize the applicant named above to lobby on behalf of the undersigned

ORGANIZATION:

PERSON AUTHORIZING LOBBYIST AND TITLE:

SIGNATURE OF PERSON AUTHORIZING LOBBYIST:

* O.C.G.A. § 21-5-75 (a) Every constitutional officer; every elected state official; the executive head of every state department or agency, whether elected or appointed; each member of the General Assembly; and the executive director of each state board, commission, or authority shall be prohibited from registering as a lobbyist or engaging in lobbying under this article for a period of one year after terminating such employment or leaving such office.