



# CITY OF TRACY LOBBYIST REGISTRATION FORM

For Internal Office Use only

Please check one box:

New Registration \$70

Amendment

Annual Registration \$35

## Section I: Registering Lobbyist

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: Government decision(s) that may be affected

Describe action Lobbyist seeks to influence:

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

**Section IV: Submit**

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

**Mail or Deliver in Person to:**  
**City Clerk**  
**Attn: City Lobbyist Registration**  
**333 Civic Center Plaza, 2<sup>nd</sup> Floor**  
**Tracy, CA. 95376**

**Contact:**  
**Telephone: (209) 831-6105**  
**Email: [cityclerk@ci.tracy.ca.us](mailto:cityclerk@ci.tracy.ca.us)**

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