



**CITY OF SUNNY ISLES BEACH  
PRINCIPAL (CLIENT) REGISTRATION  
AND FEE DISCLOSURE FORM**

Office of the City Clerk, 18070 Collins Avenue, Sunny Isles Beach, FL 33160  
(305) 792-1703 Direct Phone (305) 947-0606 Main Phone (305) 949-3113 Fax

Calendar Year: \_\_\_\_\_

\_\_\_\_\_  
*City Clerk's Date Stamp*

- NOTE:**
- All Lobbyist and Principal (Client) Registrations automatically expire on December 31<sup>st</sup> of each year.
  - A separate Principal (Client) registration is required for each principal (client).
  - Each person who withdraws as a lobbyist must file a "Notice of Withdrawal" with the City Clerk.
  - Lobbyist Expenditure Reports must be filed with the City Clerk by January 15<sup>th</sup> of each year.
  - Lobbyist Expenditure Reports must be filed even if you have no expenditures for the calendar year.
  - All lobbyist & principal registration forms, reports, & notices of withdrawal shall be submitted to the City Clerk.

**I. Lobbyist Information**

Last Name	First Name	Middle Initial	
Business/Firm Name			
Business Address	City	State	Zip
(_____) _____	(_____) _____		
Phone	Fax	E-Mail	

**II. Principal Information**     \$100 Fee Due:     No Fee Due: *Duplicate Clients of* \_\_\_\_\_.

Last Name	First Name	Middle Initial	
Business/Firm Name			
Business Address	City	State	Zip
(_____) _____	(_____) _____		
Phone	Fax	E-Mail	
<p><b>Other Principals or Interests holding directly or indirectly a 5% or more ownership interest (pursuant to Section 33-2 of the Sunny Isles Beach Municipal Code).</b></p> <p>_____</p> <p>_____</p> <p>_____</p>			
<p><b>Subject Matter (Must be specific &amp; describe in detail!):</b> _____</p> <p>_____</p> <p>_____</p>			
<p><b>Identify each individual (Mayor, Commissioner, Board, Committee, or City staff) to be lobbied:</b> _____</p> <p>_____</p>			

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**III. Fee Disclosure** Check one.

Sunny Isles Beach Municipal Code Section 33-2 requires the disclosure of terms and amount of compensation (to be) paid by each principal to the lobbyist with regard to the specific issue on which the lobbyist has been engaged to lobby.

Attached is a copy of the fee letter, indicating any bonuses, success fees, or other considerations to be received for said lobbying activity.

Or

The terms and amount of compensation (to be paid) to lobbyist with regard to the specific issue on which the lobbyist has been engaged is as follows:

Terms: \_\_\_\_\_

Conditions: \_\_\_\_\_

Other: \_\_\_\_\_

Note: Violation of this ordinance or any false statements made on this disclosure statement may render decisions on issues being lobbied voidable.

**IV. Oaths**

**Lobbyist:**

**I, the undersigned registrant, do hereby depose under oath and say that the information disclosed herein and on any attachment hereto is true and correct.**

State of Florida, County of \_\_\_\_\_  
 Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_\_\_.  
 \_\_\_\_\_ Personally known or \_\_\_\_\_ Produced ID  
 Type of ID Produced: \_\_\_\_\_

\_\_\_\_\_  
 Signature of Lobbyist

\_\_\_\_\_  
 Notary Public in and for the State of Florida at Large  
 Notary Seal:

**Principal:**

**I, the undersigned registrant, do hereby depose under oath and say that the information disclosed herein and on any attachment hereto is true and correct.**

State of Florida, County of \_\_\_\_\_  
 Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 200\_\_\_\_.  
 \_\_\_\_\_ Personally known or \_\_\_\_\_ Produced ID  
 Type of ID Produced: \_\_\_\_\_

\_\_\_\_\_  
 Signature of Principal

\_\_\_\_\_  
 Notary Public in and for the State of Florida at Large  
 Notary Seal:

**For Office Use Only:**  \$100 Fee Due: Check # \_\_\_\_\_  No Fee Due: Duplicate Clients of \_\_\_\_\_  
 Accepted  Rejected If rejected, state reason \_\_\_\_\_  
 Date Logged: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_ Initials: \_\_\_\_\_