



**CITY OF SOUTH MIAMI
LOBBYIST AUTHORIZATION FORM**

PRINCIPAL'S

NAME: _____

PRINCIPAL'S CONTACT

PERSON: _____

PRINCIPAL'S TRADE

NAME: _____

MAILING

ADDRESS: _____

TELEPHONE NUMBER: _____

NAME OF LOBBYIST(S) _____

LOBBYIST'S ADDRESS: _____

TELEPHONE NUMBER: _____

DATE EMPLOYED: _____

Is lobbyist employed for a specific issue?

Yes

No

SPECIFIC ISSUE: _____

I swear under penalty of perjury that the information on this form is true and accurate.

PRINCIPAL'S SIGNATURE: _____

DATE: _____

Violations may be determined by the Miami-Dade County Commission on Ethics and Public Trust. A finding by the Commission that a person has violated this Chapter shall subject the person to those penalties set forth in Section 2-11.1 of the Metropolitan Dade County Code. The penalties include admonition, public reprimand, and fines, as well as prohibitions from registering as a lobbyist or engaging in lobbying activities before the City.

