



# Lobbyist Registry



## Paid Lobbyist WITHDRAWAL Form

Fill out information requested and return original completed form to the address below. It is the duty of each lobbyist to continually update and file this information.

Name of Lobbyist: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Firm Name (if applicable) \_\_\_\_\_

Business Address (Street/P.O. Box, City, Zip Code) \_\_\_\_\_

\_\_\_\_\_

Description of nature and extent of any direct business association or partnership with any current Palm Beach County Commissioner, Advisory Board member or County employee:

\_\_\_\_\_

### Principal to Withdraw

Principal Name: \_\_\_\_\_

Firm Name: \_\_\_\_\_

Address: \_\_\_\_\_

\_\_\_\_\_

Legislative Interest of Principal: \_\_\_\_\_

**In compliance with Palm Beach County Lobbyist Registration Ordinance, Palm Beach County Code, Chapter 2, Article VIII, as amended, I hereby submit this withdraw form, and state that the information contained herein is true and correct.**

**Registrant/Lobbyist is no longer representing the above principal**

X \_\_\_\_\_ / \_\_\_\_\_  
Registrant/Lobbyist Signature Date

**Return original completed form to:**

Legislative Affairs  
301 N. Olive Avenue, Suite 1101  
West Palm Beach, FL 33401  
(561) 355-3452