



LOBBYIST INFORMATION – SCHEDULE A

Note: Please complete this form when listing additional lobbyists who will be engaging in lobbying activity on behalf of your clients. This form may be duplicated for additional entries.

1. NAME OF LOBBYIST (Last, First, M.I.)		BUSINESS EMAIL		BUSINESS PHONE (XXX) XXX-XXXX	
Check here if address is same as firm address					
BUSINESS ADDRESS		CITY	STATE	ZIP CODE	
2. NAME OF LOBBYIST (Last, First, M.I.)		BUSINESS EMAIL		BUSINESS PHONE (XXX) XXX-XXXX	
Check here if address is same as firm address					
BUSINESS ADDRESS		CITY	STATE	ZIP CODE	
3. NAME OF LOBBYIST (Last, First, M.I.)		BUSINESS EMAIL		BUSINESS PHONE (XXX) XXX-XXXX	
Check here if address is same as firm address					
BUSINESS ADDRESS		CITY	STATE	ZIP CODE	
4. NAME OF LOBBYIST (Last, First, M.I.)		BUSINESS EMAIL		BUSINESS PHONE (XXX) XXX-XXXX	
Check here if address is same as firm address					
BUSINESS ADDRESS		CITY	STATE	ZIP CODE	
5. NAME OF LOBBYIST (Last, First, M.I.)		BUSINESS EMAIL		BUSINESS PHONE (XXX) XXX-XXXX	
Check here if address is same as firm address					
BUSINESS ADDRESS		CITY	STATE	ZIP CODE	
6. NAME OF LOBBYIST (Last, First, M.I.)		BUSINESS EMAIL		BUSINESS PHONE (XXX) XXX-XXXX	
Check here if address is same as firm address					
BUSINESS ADDRESS		CITY	STATE	ZIP CODE	
7. NAME OF LOBBYIST (Last, First, M.I.)		BUSINESS EMAIL		BUSINESS PHONE (XXX) XXX-XXXX	
Check here if address is same as firm address					
BUSINESS ADDRESS		CITY	STATE	ZIP CODE	

If more space is needed, check box and attach additional pages.