Senate of Pennsylvania

Lobbyist Registration Statement for 2005-06

SUPPLEMENTAL STATEMENT FOR 2005-06

(Please print or type legibly)

I _____ hereby register under the Senate Lobbying Rules.

My business address is:

STREET _____ CITY _____ STATE _____

ZIP CODE _____ COUNTY _____

DAYTIME TELEPHONE NUMBER _____ FAX NUMBER _____

The names and addresses of the person(s), partnership(s), committee(s), association(s), corporation(s), or other organization(s) by whom I am employed or engaged for compensation OR for whom I shall make expenditures or incur obligations and in whose interest I will lobby, are as follows:

NAME _____ DAYTIME TELEPHONE _____

BUSINESS ADDRESS _____

CITY/STATE _____ ZIP CODE _____

NAME _____ DAYTIME TELEPHONE _____

BUSINESS ADDRESS _____

CITY/STATE _____ ZIP CODE _____

NAME _____ DAYTIME TELEPHONE _____

BUSINESS ADDRESS _____

CITY/STATE _____ ZIP CODE _____

NAME _____ DAYTIME TELEPHONE _____

BUSINESS ADDRESS _____

CITY/STATE _____ ZIP CODE _____

NAME _____ DAYTIME TELEPHONE _____

BUSINESS ADDRESS _____

CITY/STATE _____ ZIP CODE _____

NAME _____ DAYTIME TELEPHONE _____

BUSINESS ADDRESS _____

CITY/STATE _____ ZIP CODE _____

(If additional space is necessary, please use reverse side of this form or attach additional sheets)

Duration of employment: Indefinite _____ Specific Term _____

(Please indicate "Indefinite" or the specific term that you will be lobbying for the above)

Whenever any of the facts set forth above change in any material way, including a termination of representation, a SUPPLEMENTAL registration statement or termination letter setting forth the facts as changed must be submitted within 14 days of such change.

Please submit in DUPLICATE to:

Secretary of the Senate, 462 Main Capitol Building, Harrisburg, Pennsylvania 17120

Signature _____

Name _____ Daytime Telephone _____
Business Address _____
City/State _____ Zip Code _____

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Business Address _____
City/State _____ Zip Code _____

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