



# LOBBYIST REGISTRATION

SECRETARY OF STATE

SFN 11106 (05-09)

FOR OFFICE USE ONLY

ID Number

WO Number

Secretary of State  
 State of North Dakota  
 600 E Boulevard Ave Dept 108  
 Bismarck ND 58505-0500  
 Telephone 701-328-3665  
 Toll Free 800-352-0867 Ext 8-3665  
 Fax 701-328-1690  
 Web Site: www.nd.gov/sos

**FEE: \$25.00 registration and one entity**  
**Additional \$15.00 for each subsequent entity**

### Instructions:

- For reference, see North Dakota Century Code, Chapter 54-05.1.
- Print full name, business address, telephone number, city, state, zip code.
- Print the name and address of each entity (i.e. person, business, association, group, organization, club) on whose behalf you will be attempting to influence legislation as to its passage, amendment, defeat, approval, or veto. Print any acronym, if applicable, in parenthesis after the entity's full name.
- For each entity listed, use the following list to code as many of the primary activities of the entity as may be appropriate.

- |                 |               |                    |                      |            |
|-----------------|---------------|--------------------|----------------------|------------|
| 1 - Agriculture | 4 - Education | 7 - Human Services | 10 - Senior Citizens | 13 - Youth |
| 2 - Banking     | 5 - Energy    | 8 - Labor          | 11 - Transportation  | 14 - Other |
| 3 - Business    | 6 - Health    | 9 - Mining         | 12 - Utilities       |            |

- If the lobbyist is paid by someone other than the listed entity, print the name in the space indicated.
- For each entity listed on the registration form, the lobbyist must provide a letter of authorization from that entity. Under state law, a lobbyist is not allowed to lobby on behalf of that entity until the letter of authorization is on file with the Secretary of State.
- The lobbyist may add additional entities to the registration form at any time during the registration period by paying \$15 for each subsequent listing and providing a letter of authorization.
- Sign, date and mail registration form to the address listed in the upper right hand corner.

**FAX FILING:** A document and Credit Card Payment Authorization may be faxed to 701-328-1690. A faxed filing does not expedite the process of the document in the office of the Secretary of State.

Name of Lobbyist (Last, First)		Business Telephone Number	
Business Address	City	State	Zip Code
E-Mail Address	Web Address		

1.	Name of Entity	Activity Code	
	Business Address	City	State
		Zip Code	
	Name (if different than entity, by whom the Lobbyist will be paid)	Address	

2.	Name of Entity	Activity Code	
	Business Address	City	State
		Zip Code	
	Name (if different than entity, by whom the Lobbyist will be paid)	Address	

3.	Name of Entity	Activity Code	
	Business Address	City	State
		Zip Code	
	Name (if different than entity, by whom the Lobbyist will be paid)	Address	

**As a condition to the granting of a lobbyist registration, I agree to file on or before August 1 of each year, a detailed report on forms provided by the Secretary of State, of each expenditure of sixty dollars or more expended on any single occasion.**

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

\_\_\_\_\_  
Date

**(additional entities can be listed on the reverse side)**

4.

Name of Entity			Activity Code
Business Address	City	State	Zip Code
Name (if different than entity, by whom the Lobbyist will be paid)		Address	

5.

Name of Entity			Activity Code
Business Address	City	State	Zip Code
Name (if different than entity, by whom the Lobbyist will be paid)		Address	

6.

Name of Entity			Activity Code
Business Address	City	State	Zip Code
Name (if different than entity, by whom the Lobbyist will be paid)		Address	

7.

Name of Entity			Activity Code
Business Address	City	State	Zip Code
Name (if different than entity, by whom the Lobbyist will be paid)		Address	

8.

Name of Entity			Activity Code
Business Address	City	State	Zip Code
Name (if different than entity, by whom the Lobbyist will be paid)		Address	

9.

Name of Entity			Activity Code
Business Address	City	State	Zip Code
Name (if different than entity, by whom the Lobbyist will be paid)		Address	

10.

Name of Entity			Activity Code
Business Address	City	State	Zip Code
Name (if different than entity, by whom the Lobbyist will be paid)		Address	

11.

Name of Entity			Activity Code
Business Address	City	State	Zip Code
Name (if different than entity, by whom the Lobbyist will be paid)		Address	