STOT CHIC GO	740 N. Sed	CITY OF CHICAGO BOARD OF ETHICS 740 N. Sedgwick St., Suite 500 Chicago, IL 60654-8488 Phone: (312) 744-9660 Fax: (312) 744-2793 www.cityofchicago.org/Ethics		Form B	
	Phone: (312) 744-9				
	AMENDMENT TO LOP	AMENDMENT TO LOBBYIST STATEMENT OF REGISTRATION			
NAME (First, M	l, Last):			Suffix:	
ADDRESS:			STATE:	ZIP:	
	Employer Name:				
	ment of Registration as follows:				
	م ANT contact Information (name, e	mail, address, etc.)			
NAME (First, M	L l ast):			Suffix:	
		CITY:	STATE:	<u> </u>	
			 FAX:		
You will need to comp ADD the listed CLIEN my current registratic	on.			DENT (Form A, A	
You will need to com	plete and attach "Form A Part1", b T(S)) to on. "Form		JISTRANT'S CORRESPON	DENT (FORM A, A	
<ul> <li>You will need to comp</li> <li>ADD the listed CLIEN<sup>™</sup></li> <li>my current registratic</li> <li>Include a completed</li> <li>A, Part 2<sup>™</sup> and \$75. fo</li> <li>added client.</li> </ul>	plete and attach "Form A Part1", b T(S)) to on. "Form r each 75.00 for each client after the first	ut without registration fee.	or Money Number	DENT (FORM A, A	
<ul> <li>You will need to compare to compare to complete to co</li></ul>	plete and attach "Form A Part1", b T(S)) to on. "Form r each 75.00 for each client after the first ded in the form of:	ut without registration fee.	or Money	DENT (FORM A, A	
<ul> <li>You will need to completed to completed ADD the listed CLIEN' my current registration Include a completed A, Part 2" and \$75. fo added client.</li> <li>The registration fee of the registered client is include to be the listed CLI from my current registration. Include completed "Form C, F for each deleted clier</li> </ul>	plete and attach "Form A Part1", b T(S)) to on. "Form r each 75.00 for each client after the first ded in the form of:	ut without registration fee.	or Money Number		