



Cancellation of Lobbyist Registration Form

Suwannee River Water Management District

Please type or *print clearly* the name of the lobbyist and the principal represented as they are shown on the lobbyist registration form for the Suwannee River Water Management District. **Cancellation is effective upon receipt by the SRWMD.**

Name of Lobbyist

Last Name

First Name

MI

Lobbyist's Mailing Address

CANCELLATION Request:

Name of Principal to be cancelled

Name of Lobbying Firm to be cancelled

Signature of Lobbyist

Date

**Return completed form via email to Lobbying@srwmd.org or via mail to:
Contracts and Procurement Coordinator • Suwannee River Water Management District • ATTN: Lobbyist registration
9225 County Road 49 • Live Oak, FL 32060**

I do solemnly swear that all the foregoing facts are true and correct.

Original Signature of Lobbyist

STATE OF FLORIDA

COUNTY OF _____

Sworn to (or affirmed) and subscribed before me this _____ day of _____ 20 ____, by _____

Personally known _____ OR Produced identification _____ Type of Identification Produced _____

Notary Signature

(Seal or Stamp)

Print, Type or Stamp Name of Notary