

Lobbyist Notice of Cancellation

A lobbyist uses this form to indicate the end of his or her lobbying relationship with a particular principal under the provisions of School Board policy 6321.

Lobbyist Information

First Name:	Middle Name:	Last Name:
Lobbyist's Employer:		
Address:		
City:	State:	Zip:
Preferred Phone Number:		
Preferred Email Address:		

Principal Represented

Name of Principal:		
Address:		
City:	State:	Zip:
Preferred Phone Number:		
Preferred Email Address:		
Date Representation Ended:		

Certification

Signature of lobbyist (or, if filing form electronically, type full name to sign)	Date

Filing This Form

Submit this form electronically to Suzanne Ponder, Program Manager, Citizen Information Center at suzanne.ponder@sdhc.k12.fl.us

– OR –

Submit this form on paper by mail or in person to:

Office of Communications
Attention Program Manager, Citizen Information Center
901 East Kennedy Blvd
Tampa, Florida 33602