



WAYNE COUNTY
BOARD OF ETHICS

LOBBY REGISTRATION

PLEASE READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. REGISTRANT'S NAME (Only one person may register with this form)

Monique C. Field Foster

- 2. TYPE OF FILING**
- ☒ **ORIGINAL** Registration (ID number will be assigned by this office)
- ☐ Registering as a **LOBBYIST** (see definition on reverse of form)
- ☒ Registering as a **LOBBYIST AGENT** (see definition on reverse of form)
- ☐ **AMENDMENT** to existing Registration. Item(s) being amended: _____

3a. MAILING ADDRESS (All mail will be sent to this address)

120 N, Washington Sq.
Suite 410
Lansing, MI 48933

Email: _____ Telephone Number: (517) 679-7435

3b. BUSINESS ADDRESS (If different than item 3a)

3c. RESIDENTIAL ADDRESS (for individuals only)

4122 Cornell Rd.
Okemos, MI 48864

Telephone Number: _____ Telephone Number: _____

4. DATE BECAME ACTIVE (see registration requirements on reverse)

06/27/17

Month Day Year

**DATE
REQUIRED**

5. LOBBYIST FISCAL YEAR

FROM: _____
Month Day Year
TO: _____
Month Day Year

6. EMPLOYEE'S NAME & ADDRESS (see registration requirements on reverse)

NOTE: Completing this item **DOES NOT** register or terminate any person as a Lobbyist or a Lobbyist Agent. Employees meeting the definition of a Lobbyist or Lobbyist Agent at any time must register separately.

- ☐ ADD
- ☐ DELETE
- ☐ ADD
- ☐ DELETE

7. VERIFICATION

I certify that all reasonable diligence was used in preparation of the above form, and the contents are true and accurate, to the best of my knowledge. If filing electronically, I further agree that the signature below will serve as the signature verifying that all reasonable diligence was used in preparation of all electronically filed reports and their contents are true and accurate to the best of my knowledge.

Monique C. Field Foster

Type or Print Name of **AUTHORIZED SIGNATORY**

(All mail will be directed to the signatory's attention)

SIGNATURE

06/27/17

Month Day Year