



# LOBBYIST TERMINATION FORM

OFFICE OF THE CITY CLERK LICENSE DIVISION  
200 E. WELLS ST. ROOM 105, MILWAUKEE, WI 53202  
(414) 286-2238 E-MAIL ADDRESS: [LICENSE@MILWAUKEE.GOV](mailto:LICENSE@MILWAUKEE.GOV)  
<http://city.milwaukee.gov/lobbying>  
Regulations located in Chapter 305 of the Milwaukee Code of Ordinances.

\_\_\_\_\_ (Lobbyist Name)

has been terminated as a lobbyist for

\_\_\_\_\_ (Principal Name)

**I certify that the above lobbyist's engagement or employment for the above principal has been terminated. I further certify that I am authorized to sign this document on behalf of the principal.\***

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_ **Phone Number:** \_\_\_\_\_

**The termination is effective upon receipt of this signed form by the City Clerk License Division.**

**\*Only the original signature of those individuals listed as authorized to sign documents on behalf of the principal will be accepted.**

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Office Use Only:

Initials: \_\_\_\_\_ Transaction #: \_\_\_\_\_ Date & Time Stamp: