



CITY OF BEVERLY HILLS
CITY CLERK'S OFFICE
LEGISLATIVE ADVOCATE REGISTRATION FORM
(This document shall be available for public review)

Please write legibly or use typewriter

Advocate's Name: _____

Telephone #: _____ Fax # _____

Business Address: _____

Identity of Client(s): _____

General Description of the matter of municipal legislation the legislative advocate is attempting to influence:

- cc: Councilmembers
Planning Commissioners
Architectural Commissioners
Public Works Commissioners
City Manager
City Attorney