LOBBY	IST REGISTRATION ST	ATEMENT
Check applicable box: New Registrati	on Amendment A	nnual Renewal
	Permanent business addre	ISS APILL T
I shows a label to 0 and to 2. F. H. M.	- HIfron	Park RECEIVED
Lobbyist or Lobbyist Organization Full Na Permanent Telephone Number:	me;	
	00 Uptoun Blud	NE GUILLE
City:	State: VM	87/10
		Zip Code: 0 ///0
	hile lobbying or conducting	lobbyist campaigning
Business Address: Same	as above	
City:	State:	Zip Code:
Lo	bbyist Organization Chairpe	erson
Chairperson Full Name: 50	me as above	
Telephone Number:		
Address:		
City:	State:	Zip Code:
	obbyist Organization Treas	
Treasurer Fuli Name: 5a		
Telephone Number:		
Address:		
		Zip Code:
	ntion's Bank and Checking A	A • • • • • • • • • • • • • • • • • • •
Name of Bank: Sandia	ass Federal Cir	redit Union
Address:		
City: / b	State: WM	Zip Code:
Checking Account Number:		
All parties with Signature	Authority for Lobbyist Orga	nization's Checking Account
Full Name: Al Free	Park	
Telephone Number:		
Address:		- 10-10-10-10-10-10-10-10-10-10-10-10-10-1
City:		
ull Name:		
Telephone Number:		
Address:		
City:	State:	Zip Code:

LOBBYIST'S EMPLOYERS Lobbyist's Employers Information						
Address: 490 L'Enfant Plaza # 8214						
city: Washington	State:	Zip Code: 2002 4				
Employer:						
Address:						
City:	State:	Zip Code:				
•						
Employer:						
Address:						
City:	State:	Zip Code:				
Employer:						
Address:						
City:	State:	Zip Code:				
Employer:						
Address:						
City:	State:	Zip Code:				
Employer:	·					
Address:						
City:	State:	Zip Code:				
Employer:						
Address:						
City:	State:	Zip Code:				
For additional employers, use a second form and attach to original.						

OFFICIAL ACTION FORM					
Lobbyist's Permanent business address					
Lobbyist or Lobbyist Organization Full Name: Alfred Park					
Permanent Telephone Number: 505 - 246 - 2805					
Permanent Business Address:	18 town	BIVE, NE			
City:	State: NN	Zip Code:	87/10		
7119					
Official action the lobbyist or lobbyist organization supports or opposes					
Hog and al	Maffers	that per	tain		
to Cite lum	•				
•					
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	7.5				
Lobbyist Official Action B	ank and Checkir	ag Account Inform	ation		
2000yiot Official Action D	ank and Checki	ig Account Inform	1011		
Name of Bank:					
Address:					
City:	State:	Zip Code:			
Checking Account Number:					
All parties with Signature Authority for Lobbyist's Official Action Checking Account					
Alfred Pa	N		•		
Full Name:	hove.				
Address: Sue US U	.,,				
City:	State:	Zip Code:			
Full Name:					
Address:					
City:	State:	Zip Code:			
I understand that I must file an Annual Registration Renewal every twelve months after the date of this registration, as long					
as I continue to perform lobbyist activities, as defined in the Lobbyist and Lobbyist Organization Registration and Disclosure Ordinance. In the event any change occurs in the above information, including but not limited to, new official actions					
supported or opposed, I am required to notify the City Clerk of changes within one month of such occurrence.					
I swear or affirm that the above information is true and correct to the best of my knowledge					
1 1 1					
2/16/11					
Signature	- ī	Date			