LOBBYIST REG	GISTRATION	STATEMENT				
Check applicable box: New Registration	Amendment [	Annual Renéwal (1) 4 Cancel Registration				
Permanent business address						
Lobbyist or Lobbyist Organization Full Name:	ELSEY EVANS	RECEIVED				
Permanent Telephone Number: 506 247	_					
Permanent Business Address: 201 Coat Aug	SW					
CHY: ALRUQUEA QUE	State: NM	Zip Code: 87102				
Business address while lobbying or conducting lobbyist campaigning						
Business Address: 201 (0AL AWE SW						
CHY: ALBUQUERQUE		Zip Code: 87102				
Lobbyist Organization Chairperson						
Chairperson Full Name:						
Telephone Number:						
Address:						
City:		7in Code:				
	Organization Tre					
•		:a3u1E1				
Treasurer Full Name:						
Telephone Number:						
Address:						
City:						
Lobbyist Organization's Ba	ank and Checkin	g Account Information				
Name of Bank:						
Address:						
City:	State:	Zip Code:				
Checking Account Number:	Sind Market results and support of the control of t					
All parties with Signature Authorit	y for Lobbyist O	rganization's Checking Account				
Full Name:						
Telephone Number:						
Address:						
City:	State:	Zip Code:				
Full Name:						
Telephone Number:						
Address:						
City:		Zip Code:				
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## LOBBYIST'S EMPLOYERS Lobbyist's Employers Information Employer: WORKING AMERICA Address: \$15 16 Th ST NW City: WASHINGTON State: DC Zip Code: 2006 Employer:\_\_\_ Address: \_\_\_\_\_\_ State:\_\_\_\_\_\_ Zip Code:\_\_\_\_\_\_ Address:\_\_\_\_ State: Zip Code: City:\_\_\_\_ Address:\_\_\_\_\_ City:\_\_\_\_\_\_ Zip Code:\_\_\_\_\_\_ Address: City: State: Zip Code: Employer Address: State:\_\_\_\_\_ Zip Code:\_\_\_\_\_ Address: State: Zip Code: For additional employers, use a second form and attach to original.

I_LL_!_i_m.	OFFICIAL ACTION FORM					
Londyist's Pe	ermanen	t business a	ddress			
Lobbyist or Lobbyist Organization Full Name:	elsey Ev	ANS				
Permanent Telephone Number: 505 1917 c	13.13					
Permanent Business Address: 201 CAN MI	, SW					
City: ALQUIQUER QUE		NW	Zip Code: <u>87(0.2</u>			
Official action the lobbyist or						
SUMBRILL FARNED SICK DAYS				,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
			in the state of th			
	**************************************					
Lobbyist Official Action B		_				
Name of Bank: AMALGAMATED BANK OF						
Address: 1 UEST MONROE ST						
City: CHICAGO	_ State:	<u> </u>	Zip Code:	13		
Checking Account Number:				kagingan apalikki kepadalahan kalapat kanada 4 4 4 melah mentilah melilikki apagaga		
All parties with Signature Authorit	ty for Lo	bbyist's Offi	cial Action Checking	Account		
Full Name: JAMES CORR JR.						
Address: 815 167" ST NW						
City: WASHING TON				2		
Full Name: EUZABETH TOWNE		ayanga amerika matan <mark>unga mangalangan kanangan mangalan da</mark>				
Address: \$15 16TH ST NW		~ (	2.00			
	State:	DC	Zip Code: 2:000	06		
Address: \$15 16TH ST NW		DC	2~~	06		
Address: \$15 16TH ST NW  City: WASHINGTON	State:	DC	Zip Code: 2:000	06		
Address: \$15 16** ST NW  City: WASHINGT ON  I understand that I must file an Annual Registration as I continue to perform lobbyist activities, as defin	State:	DC very twelve mont	Zip Code: 2000 hs after the date of this regis rist Organization Registration	tration, as long		
Address: \$15 16** ST NW  City: WASHINGTON  I understand that I must file an Annual Registration	State:	very twelve mont obbyist and Lobby formation, includ	Zip Code: 2000 hs after the date of this regis ist Organization Registration ing but not limited to, new	tration, as long		
Address: \$15 16 TM ST NW  City: WASHINGTON  I understand that I must file an Annual Registration as I continue to perform lobbyist activities, as defin Ordinance. In the event any change occurs in the supported or opposed, I am required to notify the City	State: n Renewal en led in the Lo le above inf ty Clerk of ch	very twelve mont obbyist and Lobby formation, includ nanges within one	Zip Code: 2000 hs after the date of this regis ist Organization Registration ing but not limited to, new month of such occurrence.	tration, as long		
Address: \$15 16** ST NW  City: WASHINGT ON  I understand that I must file an Annual Registration as I continue to perform lobbyist activities, as defin Ordinance. In the event any change occurs in the	State: n Renewal en led in the Lo le above inf ty Clerk of ch	very twelve mont obbyist and Lobby formation, includ nanges within one	Zip Code: 2000 hs after the date of this regis ist Organization Registration ing but not limited to, new month of such occurrence.	tration, as long		
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Address: \$15 16 TM ST NW  City: WASHINGTON  I understand that I must file an Annual Registration as I continue to perform lobbyist activities, as defin Ordinance. In the event any change occurs in the supported or opposed, I am required to notify the City	State: n Renewal en led in the Lo le above inf ty Clerk of ch	very twelve mont obbyist and Lobby formation, includ nanges within one	Zip Code: 2000 hs after the date of this regis ist Organization Registration ing but not limited to, new month of such occurrence.	tration, as long		