# LOBBYIST REGISTRATION STATEMENT

Check applicable box: [ ] New Registration [ ] Amendment [ ] Annual Renewal [ ] Cancel Registration

## Permanent business address

Lobbyist or Lobbyist Organization Full Name: **Vanessa Alard**
Permanent Telephone Number: **505-503-0240**
Email address: **Valarid@gmail.com**
Permanent Business Address: **PO Box 36775**
City: **Albuquerque** State: **NM** Zip Code: **87176**

## Business address while lobbying or conducting lobbyist campaigning

Business Address: **Same DBA Alard Consulting**
City: __________________________ State: __________________________ Zip Code: __________________________

## Lobbyist Organization Chairperson

Chairperson Full Name: **Same**
Telephone Number: __________________________
Address: __________________________
City: __________________________ State: __________________________ Zip Code: __________________________

## Lobbyist Organization Treasurer

Treasurer Full Name: **Same**
Telephone Number: __________________________
Address: __________________________
City: __________________________ State: __________________________ Zip Code: __________________________

## Lobbyist Organization’s Bank and Checking Account Information

Name of Bank: **NMSBNA**
Address: **Alb** State: **NM** Zip Code: __________________________
Checking Account Number: __________________________

## All parties with Signature Authority for Lobbyist Organization’s Checking Account

Full Name: **Vanessa Alard**
Telephone Number: **505-503-0240**
Address: __________________________
City: __________________________ State: __________________________ Zip Code: __________________________

Full Name: __________________________
Telephone Number: __________________________
Address: __________________________
City: __________________________ State: __________________________ Zip Code: __________________________

Full Name: __________________________
Telephone Number: __________________________
Address: __________________________
City: __________________________ State: __________________________ Zip Code: __________________________
Employer: Alarid Consulting
Address: P.O. Box 36775
City: Albuquerque State: NM Zip Code: 87126

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: 

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: Willard Consulting LLC
Permanent Telephone Number: 512-502-30040
Permanent Business Address: PO Box 34778
City: San Antonio State: TX Zip Code: 78234

Official action the lobbyist or lobbyist organization supports or opposes


Lobbyist Official Action Bank and Checking Account Information

Name of Bank:
Address:
City: State: Zip Code:
Checking Account Number:

All parties with Signature Authority for Lobbyist’s Official Action Checking Account

Full Name: Kevin Allen
Address: 5900
City: San Antonio State: TX 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

Signature

Date: Sept 4, 2018