



# MEMORANDUM OF UNDERSTANDING

THIRD PARTY PREPARER—BUSINESS/ORGANIZATION REGISTRANT

THE MOU WILL BE ACTIVATED WITHIN 24 HOURS AFTER THE FORM IS RECEIVED.

A Memorandum of Understanding (MOU) is required for each individual or organization to be registered using the online filing system.

- 1. **LOBBYING AGREEMENT DATE:** \_\_\_\_\_ **\*\*Required**  
(Registrations not filed within fifteen (15) business days of this date will be considered late. Late fees will apply at a rate of up to \$100 per day.)
- 2. Name of organization/corporation: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Phone: (      ) \_\_\_\_\_
- 3. Tax Identification Number for business listed on line 2 above: \_\_\_\_\_  
*(REQUIRED for all organizations)*
- 4. IN.Gov username associated with **PREPARER:** \_\_\_\_\_
- 5. Select the type of registrations to be filed for the lobbyist on line 2 above:  
\_\_\_\_\_ COMPENSATED LOBBYIST                      \_\_\_\_\_ EMPLOYER LOBBYIST  
\_\_\_\_\_ BOTH EMPLOYER AND COMPENSATED LOBBYIST

**Preparer Information:**

Name of preparer: \_\_\_\_\_

Name of preparer's company: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: (      ) \_\_\_\_\_

Email address of person assigned to the username on line 4 above: \_\_\_\_\_

I request the approval of the ILRC to submit required filings electronically. I understand that any such submissions will require an electronic signature as described in the Uniform Electronic Transaction Act (See I.C. 26-2-8). This electronic signature may consist of an IN.gov username and any other marks made electronically by the lobbyist in the course of filing that indicate assent to or adoption of the information submitted. The adoption of such an electronic signature has the same legally binding effect as a traditional signature. I affirm my intention to be bound by such an electronic signature on any documents submitted to the ILRC by electronic means.

**\*\*PLEASE NOTE: This form must be signed by a person listed on the employer registration statement in Section B as a responsible party for the entity.**

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

Return form to: Indiana Lobby Registration Commission    OR    Fax completed form to: (317) 233-0077  
10 W. Market Street, Ste. 2940  
Indianapolis, IN 46204  
317-232-9860