



Wyoming Secretary of State
 2020 Carey Avenue, Suite 600
 Cheyenne, WY 82002-0020
 Ph. 307.777.5860
 Email: Elections@wyo.gov

WY Secretary of State
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Lobbyist Amendment Form

This form is **ONLY** for lobbyists registered during the period May 1 – April 30 who need to **change** details of their registrations (i.e. add/delete/amend principals, change of address or contact information, etc.)

PLEASE COMPLETE THE PART(S) YOU ARE AMENDING. PLEASE PRINT LEGIBLY OR TYPE.

PART 1: Lobbyist Name Currently on File

Name: David Picard
First Name Last Name

PART 2: Change of Lobbyist Information

Lobbyist New Name: _____ *(If Applicable)* New Phone Number: _____ *(Required)*
 New Mailing Address: _____ *Street/P.O. Box* New Email: _____ *(Required)*
 _____ *City State Zip*

PART 3: Add/Delete/Amend Representation – (To add, delete, or amend additional representation, use next page.)

Please select one option:
 Add Delete Amend Current Information

Organization Name: R360 Environmental Solutions Phone Number: _____ *(Required)*
(Acronyms must be spelled out.)

Organization Address: 3 Waterway Square Place, Ste 110
Street/P.O. Box
The Woodlands TX 77380
City State Zip

PART 4: Signature

 11/28/18
Lobbyist Signature or Designee Date Signed

Blank PDF available at: <http://sos.state.wy.us/Forms/Forms.aspx>
 Please mail form to: Wyoming Secretary of State's Office
 Attn: Election Division
 2020 Carey Ave, Ste 600
 Cheyenne WY 82002



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Additional Representation: - (If Applicable)

Add/Delete/Amend Representation

Please select **one** option:

Add

Delete

Amend Current Information

Organization Name: DraftKings, Inc
(Acronyms must be spelled out.)

Phone Number: _____
(Optional)

Organization Address: 125 Summer Street, Floor 5
Street/P.O. Box
Boston MA 02110
City State Zip

Email: _____
(Optional)

Add/Delete/Amend Representation

Please select **one** option:

Add

Delete

Amend Current Information

Organization Name: FanDuel, Inc
(Acronyms must be spelled out.)

Phone Number: _____
(Optional)

Organization Address: 300 Park Avenue South, 14th Floor
Street/P.O. Box
New York NY 10005
City State Zip

Email: _____
(Optional)

Add/Delete/Amend Representation

Please select **one** option:

Add

Delete

Amend Current Information

Organization Name: _____
(Acronyms must be spelled out.)

Phone Number: _____
(Optional)

Organization Address: _____
Street/P.O. Box

City State Zip

Email: _____
(Optional)