

**Institutional Membership Authorization**

**Instructions:** Fill out Sections 1 and 2 when appropriated funds are used for membership fees. When non-appropriated funds are used, fill out Section 2 only.

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| **Section 1** |  | | | | | | | | | | | | |
| **Organization Name:** | |  | | | | | | | | | | | |
| **Address:** | |  | | | | | | | | | | | |
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| **Non-Lobbying Certification:** | | | *[Must be completed by organization if membership to be paid with* | | | | | | | | | | |
| *appropriated funds. A separately provided statement from the organization will also suffice.]* | | | | | | | | | | | | | |
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| *“To the best of my knowledge, this organization does not employ anyone who is required to* | | | | | | | | | | | | | |
| *register as a lobbyist in accordance with Texas Government Code, Chapter 305.”* | | | | | | | | | | | | | |
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| **Name** | | | | | |  | | **Title** | | | | | |
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| **Signature** | | | | | |  | | **Date** | | | | | |
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| **Section 2** |  | | | | | | | | | |
| **Department:** | | | |  | | | | | | | | | |
| **Membership Dues Amount:** | | | |  | | | | | | | | | |
| **Benefits to be Derived from Membership:** | | | | | | | | | | | | | |
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| **Requester** | | | | | | | **Signature** | | | | | **Date** | |
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|  | | | | | | | **Approval** | | | | | | **Date** |
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| **Texas Ethics Commission Lobby List Checked** | | | | | | | | | | | | | |
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| **Accounts Payable** | | | | | | | | |  | **Date** | | | |