

# CITY OF DETROIT LOBBYIST REGISTRATION

(PLEASE READ BOTH FRONT AND BACK COMPLETING THIS FORM)

<b>1. REGISTRANT'S NAME</b> (Only one person may register with this form) Peggy Brandon	<b>2. REGISTRANT'S ID NUMBER</b> 2017-28
<b>3. BUSINESS ADDRESS</b> (All mail will be sent to this address) c/o Scofes & Associates Consulting, Inc. 535 N Capitol Ave Lansing MI 48933	<b>4. TELEPHONE NUMBER(S)</b> (517) 485-5536 ( ) _____

**5. TYPE OF LOBBYIST** (Check all applicable boxes )

- Registered lobbyist under Federal Law
- Registered lobbyist under Michigan Law
- Registered lobbyist in other states (name state(s)): \_\_\_\_\_
- A person anticipating expenditures of more than \$1,000 over the next twelve (12) months for lobbying all public officials
- A person anticipating expenditures of more than \$250.00 over the next twelve (12) months for lobbying a single public official  
(See definition of "lobbyist" on reverse)

**6. NAME AND ADDRESS OF CLIENT(S)**

Genesys Telecommunications Laboratories, Inc.  
 2001 Junipero Sera Blvd  
 Daly City CA 94014

**7. VERIFICATION**

I swear, or affirm, that:

a) During one (1) year preceding this registration, I have not held the position of Mayor, member of the City Council, City Clerk, appointive officer, or any member of a board, commission or other voting body that is established by either branch of City government or by the 2012 Detroit City Charter or under the 1984 Detroit City Code, or been a City appointee or City employee, or an individual who provided services to the City pursuant to a personal services contract; and

b) All reasonable diligence was used in preparation of this form, and the contents are true and accurate to the best of my knowledge.

Peggy Brandon

\_\_\_\_\_  
 Type or print name of registrant

*Peggy Brandon*

\_\_\_\_\_  
 Signature

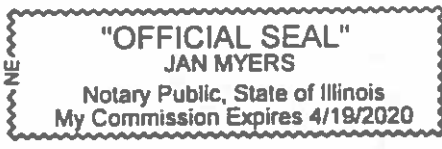
Subscribed and sworn to me this sworn to before me

this 8th day of December, 2017

*Jan Myers*

\_\_\_\_\_  
 Notary Public, Wayne County, Michigan

My Commission Expires: 4-19-2020



FOR OFFICIAL USE ONLY:		
<b>DATE OF ANNUAL REGISTRATION</b> _____ Month      Day      Year	<b>THIS REGISTRATION IS VALID</b> From _____ Month      Day      Year To _____ Month      Day      Year	Amount of fee paid: _____ Date of payment: _____