

State Agency Liaison Resignation Statement 2025

Statement of Resignation

Signature of Preparer	(If Other Than Liaison)	Printed Name of Prenarer
	Preparer Information	
iviailing address:		
•		
Telephone #:	Fax #:	
new contact information is:		
The contact information on r	my registration statement has char	nged. As of my
Signature of Liaison		Date
referred to the Lobbying Cor	mpliance Division prior to the repor	ting deadline.
is severed. G.S. §120C-401	(a). Questions about the file date for	in which the liaison/agency relationship or a termination or resignation should be
		required reporting period in which I was
	(Print name of State Agency	·)
State Agency		
(Print name or	Liaison)	
Drint name of	Liaison)	hereby resign as a liaison for the