LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

Lobbyist's Registration Number: 639

FOR OFFICE USE ONLY
Postmark Date: 1-26-00

1000257

Instructions

- Print in ink or type.
- Complete form and return with $10 registration fee to the Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge, LA 70809-7017, (225) 922-1400 or (800) 842-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

1. NAME Mc Cleary (Last) Michael (First) L. (MI)

2. BUSINESS PHONE (225) 634-2190 (Area Code and Phone Number)

3. BUSINESS ADDRESS 18 Dogwood Trace (Street and No.) The Bluffs (City) LA (State) 70748 (Zip)

MAILING ADDRESS Same. (Street and No.) (City) (State) (Zip)

4. EMPLOYER Mc Cleary and Associates, Inc.

5. EMPLOYER'S ADDRESS 18 Dogwood Trace (Street and No.) The Bluffs (City) LA (State) 70748 (Zip)

6. LIST BELOW (a) Names of persons, groups, or organizations which you represent; (b) the address of each such person, group, or organization you represent; (c) the type of business each is engaged in or the purpose or function of the organization or group; (d) whether or not the client or someone else pays you to lobby.

1. Name Walgreens Co.

Address 200 Wilmot Road Deerfield IL 60015-4616

Business or purpose Retail Pharmacies

Does this person pay you? Yes

If No, who pays you?

Form 500, Rev. 5/99

HAND DELIVERED

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2. Name Waste Management of Louisiana

Address 1428 Antioch Pike Antioch TN 37013

Business or purpose Environmental management

Does this person pay you? Yes

If No, who pays you?

3. Name Calcasieu Parish Police Jury

Address PO Box 1583 Lake Charles LA 70602

Business or purpose Parish government

Does this person pay you? Yes

If No, who pays you?

4. Name Council of Louisiana Trustees

Address 33 Neron Place New Orleans LA 70118

Business or purpose Professional organization / Retirement system trustees

Does this person pay you? Yes

If No, who pays you?

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; and that no information required by the Lobbyist D[illegible] seq.] has been deliberately omitted.

Signature of Lobbyist

Form 500, Rev. 6/99