LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

294

Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 1-28-00

1000538

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 Patterson (Last) Jim (First) ____ (MI)

2. BUSINESS PHONE 225-928-5388 (Area Code and Phone Number)

3. BUSINESS ADDRESS 3113 Valley Creek Dr. (Street and No.) Baton Rouge (City) LA (State) 70808 (Zip)

   MAILING ADDRESS P.O. Box 80258 (Street and No.) Baton Rouge (City) LA (State) 70898-0258 (Zip)

4. EMPLOYER Louisiana Association of Business & Industry

5. EMPLOYER'S ADDRESS P.O. Box 80258 (Street and No.) Baton Rouge (City) LA (State) 70898-0258 (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 Louisiana Association of Business & Industry

      Address P.O. Box 80258 Baton Rouge LA 70898-0258

      Business or purpose Economic development and quality education

      Does this person pay you? yes

      If No, who pays you? ____

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2. Name Louisiana Right-to-Work Committee

Address P.O. Box 80258, Baton Rouge, LA 70898-0258

Business or purpose Educate with respect to Louisiana labor-management issues and their impact on the State's economy and business climate.

Does this person pay you? yes

If No, who pays you?

3. Name

Address

Business or purpose

Does this person pay you?

If No, who pays you?

4. Name

Address

Business or purpose

Does this person pay you?

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 Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.

Signature of Lobbyist

Form 300, Rev. 6/99