

LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

343

Lobbyist's Registration Number

FOR OFFICE USE ONLY

Postmark Date: 2-11-00

Rec'd
1/11/03
\$1000
KSD

1000619

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 Adcock, Sr. Herschel C.
Last First MI

2. BUSINESS PHONE 225/761-9191
Area Code and Phone Number

3. BUSINESS ADDRESS 10915 Perkins Rd., Suite C, Baton Rouge, LA 70810
Street and No. City State Zip

MAILING ADDRESS Same as above.
Street and No. City State Zip

4. EMPLOYER Self

5. EMPLOYER'S ADDRESS Same as above.
Street and No. City State 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 Dealer Services Insurance

Address P.O. Drawer 83480, Baton Rouge, LA, 70884-3480

Business or purpose Insurance

Does this person pay you? Yes

If No, who pays you? _____

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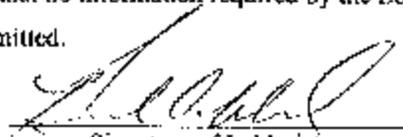
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Lobbyist's Registration Number

2. Name Louisiana Consumer Finance Association
Address 10915 Perkins Road, Suite C, Baton Rouge, LA, 70810
Business or purpose Finance
Does this person pay you? Yes
If No, who pays you? _____
3. Name B. Lebrun & Associates
Address 1932B S. Harrell's Ferry Road, Baton Rouge, LA, 70816
Business or purpose Lobbying
Does this person pay you? Yes
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 [I.S.A.-R.S. 24:50 et seq.] has been deliberately omitted.



Signature of Lobbyist

