LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

854
Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 3-20-00
Rec
V#-3957
$10.00
KSD

1000902

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 Antrobus (Last) Elise (First) Linden (MI)

2. BUSINESS PHONE 225-926-2549 (Area Code and Phone Number)

3. BUSINESS ADDRESS 2320 Drusilla Lane, Ste. E (Street and No.) Baton Rouge (City) LA (State) 70809 (Zip)

MAILING ADDRESS same as above (Street and No.) (City) (State) (Zip)

4. EMPLOYER March of Dimes Birth Defects Foundation

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 March of Dimes Birth Defects Foundation

Address 2320 Drusilla Lane, Ste. E Baton Rouge, LA 70809

Business or purpose to improve the health of babies by preventing birth defects & infant mortality through community services, education, research and advocacy

Does this person pay you? yes - as employee not as lobbyist

If No, who pays you? n/a

Form 500, Rev. 8/99

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2. Name n/a

   Address

   Business or purpose

   Does this person pay you?

   If No, who pays you?

3. Name n/a

   Address

   Business or purpose

   Does this person pay you?

   If No, who pays you?

4. Name n/a

   Address

   Business or purpose

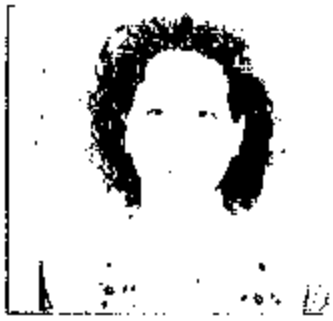
   Does this person pay you?

   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.

Elise Linden Antrobus
Signature of Lobbyist



Form 502, Rev. 6/98