LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

2001

459

Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 12-14-00
Reg
VA 5282
$100
KSD

1001802

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 STEWART (Last) BYRON (First) A. (MI)

2. BUSINESS PHONE (504) 427-9995 (Area Code and Phone Number)

3. BUSINESS ADDRESS 101 Eastpoint Court (Street and No.) New Orleans (City) LA (State) 70128 (Zip)

MAILING ADDRESS Same as Above (Street and No.) (City) (State)

SCANNED Date 12/14/00 By

4. EMPLOYER Louisiana School Board Association

5. EMPLOYER'S ADDRESS 7912 Summa Ave. (Street and No.) B.R. (City) LA (State) 70809 (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 School Boards Association

Address 7912 Summa Avenue, B.R. LA 70809

Business or purpose Educational Organization

Does this person pay you? yes

If No, who pays you?

Form 500, Rev. 6/99

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2. Name Orleans Parish Criminal Court

Address 2700 Tulane Ave, Rm 200

Business or purpose Criminal Court

Does this person pay you? ✓

If No, who pays you?

3. Name Greater New Orleans Sports Foundation

Address 1400 Poydras Street, Suite 918

Business or purpose Sporting Event Management

Does this person pay you? ✓

If No, who pays you?

4. Name LA Counseling Association

Address

Business or purpose Professional Counseling Association

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]
Signature of Lobbyist

ATTACH
2" x 2"
PHOTOGRAPH
HERE
FOR
INITIAL
REGISTRATION
ONLY

Form 626, Rev. 6/98