LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

637

Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 1-9-01

Recd
✓ # 3053188
$10.00
KB

1010077

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 TOOMAN, LEE D., JR.
   Last, First, MI

2. BUSINESS PHONE 317 240 8100 x 7476
   Area Code and Phone Number

3. BUSINESS ADDRESS 7440 WOODLAND DR. INDIANAPOLIS IN 46278
   Street and No. City State Zip

   MAILING ADDRESS SAME
   Street and No. City State Zip

4. EMPLOYER GOLDEN RULE INSURANCE CO.

5. EMPLOYER'S ADDRESS 712 ELEVENTH ST. LAWRENCEVILLE, IL, 62439
   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 GOLDEN RULE INSURANCE CO.

      Address 712 ELEVENTH ST. LAWRENCEVILLE, IL, 62439

      Business or purpose LIFE + HEALTH INSURANCE

      Does this person pay you? YES

      If No, who pays you?

2001 JAN 18 PM 2:25
ETHICS ADMINISTRATION
BATON ROUGE, LOUISIANA
RECEIVED

Form 500. Rev. 6/98

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637
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2. Name_____

Address_____

Business or purpose_____

Does this person pay you?_____

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

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

Form 600, Rev. 8/99