LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

460

Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 1-2-01

1010112

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 Fontana (Last) Wayne (First) J. (MI)

2. BUSINESSPHONE (504) 566-1801 (direct - (504) 680-4469)
Area Code and Phone Number

3. BUSINESS ADDRESS Texaco Center - Suite 1540, 400 Poydras St. N.O., LA 70130-3245
Street and No. City State Zip

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

4. EMPLOYER Courtenay, Forstall, Hunter & Fontana

5. EMPLOYER'S ADDRESS (Same)
Street and No. City State Zip

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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 Self Insured Employers (LASIE)

Address P.O. Box 4151, Baton Rouge, LA 70821-4151

Business or purpose representative of self-insured industry

Does this person pay you? yes

If No, who pays you?

Date 2/6/01

Form 202 Rev 6/99

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2. Name Downtown Development District

Address 601 Poydras St., Suite 2215, N.O., LA 70130-6019

Business or purpose

Does this person pay you? yes

If No, who pays you?

3. Name N.O. Regional Chamber of Commerce

Address 601 Poydras St., Suite 1700, N.O., LA 70130

Business or purpose

Does this person pay you?

If No, who pays you?

4. Name LA Associations of Business & Industry

Address 3113 Valley Creek, Baton Rouge, LA 70808 (LABI)

Business or purpose

Does this person pay you?

If No, who pays you?

(over)

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 500, Rev. 6-96