LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

257

Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 1-24-01

JH 20858
$10.00
Reg

1010317

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 Lyons, Marvin, L.
   Last First MI

2. BUSINESSPHONE 225 - 343-2835
   Area Code and Phone Number

3. BUSINESS ADDRESS 707 North 7th Street, Baton Rouge, La. 70802
   Street and No. City State Zip

   MAILING ADDRESS Same as No. 3 Above
   Street and No. City State Zip

4. EMPLOYER Police Jury Association of Louisiana, Inc.

5. EMPLOYER'S ADDRESS 707 North 7th Street, Baton Rouge, La. 70802
   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 Police Jury Association of Louisiana, Inc.

      Address 707 North 7th Street, Baton Rouge, La. 70802

      Business or purpose Association of Parish Governments

      Does this person pay you? Yes

      If No, who pays you?

2001 JAN 25 PM 3:

SCANNED
Date 1/26/01 By

Form 503 Rev. 8/99

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257
Lobbyist's Registration Number

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 500, Rev. 6/09