LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

890

Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 11/28/01
2002 REG
$110.00 V-#101034
PRO

1011599

Instructions

- Print in ink or type.
- Complete form and return with **$110** 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 Patterson (Last) Dickie (First) W. (MI)

2. BUSINESSPHONE 225-231-0749 (Area Code and Phone Number)

3. BUSINESS ADDRESS 2237 S. Acadian (Street and No.) Baton Rouge (City) LA (State) 70808 (Zip)

MAILING ADDRESS 2237 S. Acadian (Street and No.) Baton Rouge (City) LA (State) 70808 (Zip)

4. EMPLOYER Louisiana Workers' Compensation Corporation

5. EMPLOYER'S ADDRESS 2237 S. Acadian (Street and No.) Baton Rouge (City) LA (State) 70808 (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 Workers' Compensation Corporation

Address 2237 S. Acadian Baton Rouge LA 70808

Business or purpose Workers' Compensation Insurance Co.

Does this person pay you? _____

If No, who pays you? _____

Form 500, Rev. 7/2001

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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 500, Rev. 1/2001