LOBBYING SUPPLEMENTAL REGISTRATION FORM
To be used for changes to registrations and terminations.

Lobbyist's Registration Number

413

FOR OFFICE USE ONLY

4/24/02

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Instructions

- Print in ink or type.
- Complete form and return to Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge LA 70809-7017, (225) 922-1400 or (800) 842-6630. No fee is required.
- This form must be submitted within 5 days of any changes in your registration form, to add employers or those you represent, or if you cease all activities requiring registration. It must be submitted within 10 days of any terminations of employment or representations.

1. NAME Mayes (Last) Joe (First) A. (MI) change of Suite #

2. BUSINESS PHONE 225. 924.6121

3. BUSINESS ADDRESS 1821 Wooddale Ct #207 BR, LA 70806-1523
Street and No. City State Zip

MAILING ADDRESS
Street and No. City State Zip

4. EMPLOYER Mayes & Mayes, Inc

5. EMPLOYER'S ADDRESS Same as above Ste #207
Street and No. City State Zip

6. Have you ceased or terminated all lobbying activities requiring registration? Yes No ✓

7. LIST BELOW (a) Names of persons, groups, or organizations which you are adding or eliminating; (b) the address of each such person, group, or organization listed; (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; and (e) the date of termination if applicable.

1. Name: LA Assessor's Assn

Address: 3060 Valley Creek Dr BR, LA 70898

Business or purpose: An Association of LA Tax Assessors

☑ New Representation
Does this person pay you? No

If No, who pays you? Mapes & Mapes, Inc.

☐ Terminated Representation as of _____

Form 601, Rev. 7/2001

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SUPPLEMENTAL REGISTRATION FORM

2. Name LA Finance Assn

Address P.O. Box 40183 BR, LA 70898

Business or purpose An Assn of LA Finance Companies

☑ New Representation
Does this person pay you? No

If No, who pays you? Mapes / Mapes, Inc.

☐ Terminated Representation as of

3. Name

Address

Business or purpose

☐ New Representation
Does this person pay you?

If No, who pays you?

☐ Terminated Representation as of

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.

Joe Mapes

Signature of Lobbyist

Form 501 Rev. 7/2001