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

Lobbyist's Registration Number
412

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 Yelverton Sandra
Last First MI

2. BUSINESS PHONE 225.924.6121

3. BUSINESSADDRESS 1821 Woodside Ct #207 BR, LA 70806-75
Street and No. City State Zip

change of Sec #

MAILING ADDRESS Same
Street and No. City State Zip

4. EMPLOYER Mapes & Mapes, Inc.

5. EMPLOYER'S ADDRESS 1821 Wood. same as above
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 Assessors' Assn

Address 3060 Valley Creek Dr BR, LA 70898

Business or purpose: An Association of LA Tax Assessors

[X] New Representation
Does this person pay you? No

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

[] Terminated Representation as of

Form 53, Rev 7/00

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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.

Signature of Lobbyist

Form 501, Rev. 7/2007