LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

798

Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 1/3/03

Pen
✓ # 35580 #110-tp

1021850

Instructions

- Print in ink or type.
- Complete form and return with **$110** registration fee to the Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge, LA 70808, (225) 763-8777 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 Reilly Mica (Last) Tara (First) ____ (MI)

2. BUSINESSPHONE (703)267-1219 (Area Code and Phone Number)

3. BUSINESS ADDRESS 11250 Waples Mill Road (Street and No.) Fairfax (City) VA (State) 22030 (Zip)

MAILING ADDRESS Same (Street and No.) ____ (City) ____ (State) ____ (Zip)

4. EMPLOYER National Rifle Association - Institute for Legislative Action

5. EMPLOYER'S ADDRESS 11250 Waples Mill Rd. (Street and No.) (City) Fairfax, VA (State) 22030 (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 National Rifle Association - Institute for Legislative Action (NRA-ILA)

Address 11250 Waples Mill Road, Fairfax, VA 22030

Business or purpose Non-profit membership association in support of Second Amendment rights.

Does this person pay you? Yes

If No, who pays you? ____

Form 600, Rev. 10/2002

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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. 10/2002