1031

LOBBYING SUPPLEMENTAL REGISTRATION FORM

To be used for changes to registrations and terminations.

FOR OFFICE USE ONLY
Postmark Date: 3/4/03
Term
1022512

Instructions

- Print in ink or type.
- Complete form and return to Board of Ethics, 2415 Quail Drive, Third Floor Baton Rouge, Louisiana 70808. Phone (225)763-8777 or 1(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 Goldman (Last) Rochelle (First) H. (Mi)

2. BUSINESS PHONE 678.919.6003

3. BUSINESS ADDRESS 3330 Cumberland Blvd., Atlanta GA 30339
Street and No. City State Zip

MAILING ADDRESS same as above
Street and No. City State Zip

4. EMPLOYER Miller Brewing Company

5. EMPLOYER'S ADDRESS 3939 West Highland Blvd. Milwaukee WI 53208
Street and No. City State Zip

6. Have you ceased or terminated all lobbying activities requiring registration? Yes X 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 Miller Brewing Company

Address 3939 West Highland Blvd., Milwaukee, WI 53208

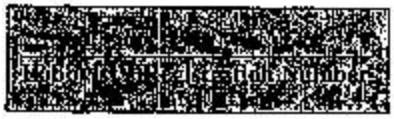
Business or purpose Brewer

☐ New Representation
Does this person pay you? ____

If No, who pays you? ____

☒ Terminated Representation as of 2/26/03

SUPPLEMENTAL REGISTRATION FORM



2. Name_____

Address_____

Business or purpose_____

☐ New Representation
Does this person pay you?_____

If No, who pays you?_____

☐ 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 93A, Rev. 7/2001