2004

# LOBBYING REGISTRATION FORM

**To be used for initial registrations and renewals.**

157

**Lobbyist's Registration Number**

**FOR OFFICE USE ONLY**
Postmark Date: 1/9/04

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v #1391p
#110 tl

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## 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 ADAM (Last) GINGER (First) E. (MI)

2. BUSINESSPHONE 225.767.5151 (Area Code and Phone Number)

3. BUSINESS ADDRESS 10652 Molly Avenue (Street and No.), Baton Rouge (City), LA (State) 70810 (Zip)

MAILING ADDRESS SAME (Street and No.) (City) (State) (Zip)

4. EMPLOYER SELF

5. EMPLOYER'S ADDRESS SAME (Street and No.) (City) (State) (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 Bossier City Mayor's Office

Address P.O. Box 5337 Bossier City, LA 71171-5337

Business or purpose Municipality

Does this person pay you? Yes

If No, who pays you?

1 of 3

HAND DELIVERED

Form 600, Rev. 10/2002

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2. Name CLECO

Address P.O. Box 5000, Pineville, LA 71361-5000

Business or purpose investor owned utility company

Does this person pay you? Yes

If No, who pays you?

3. Name LA Conference of Mayors

Address P.O. Box 4327, Baton Rouge, LA 70821

Business or purpose Non-profit organization representing urban interests

Does this person pay you? Yes

If No, who pays you?

4. Name LA Municipal Association

Address 700 North 10th street, Suite 400, Baton Rouge, LA 70802

Business or purpose Non-profit organization representing cities & parishes

Does this person pay you? Yes

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.

Ginger Adam
Signature of Lobbyist

ATTACH
2" x 2"
PHOTOGRAPH
HERE



Form 500, Rev. 10/2002

# LOBBYING REGISTRATION FORM

Lobbyist's Registration Number

2. Name LAKE CHARLES HARBOR & TERMINAL DISTRICT

Address P.O. BOX 3753, Lake Charles, LA 70602

Business or purpose Political Subdivision of the State

Does this person pay you? Yes

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.

Ginger E Adam

Signature of Lobbyist

Form 500, Rev. 10/2007