# LOBBYING REGISTRATION FORM

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

Lobbyist Registration Number

**FOR OFFICE USE ONLY**
Postmark Date: 12/22/04

Ren. 2004
V#4517
$110.00 W8

104162

## 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 Carmouche (Last) George (First) L. (MI)

2. BUSINESSPHONE 225-346-1004 (Area Code and Phone Number)

3. BUSINESS ADDRESS 321 St. Joseph St. (Street and No.) Baton Rouge (City) LA (State) 70802 (Zip)

MAILING ADDRESS P.O. Box 44301 (Street and No.) Baton Rouge (City) LA (State) 70804 (Zip)

4. EMPLOYER George L. Carmouche, APLC

5. EMPLOYER'S ADDRESS 321 St. Joseph St. (Street and No.) Baton Rouge (City) LA (State) 70802 (Zip)

LOUISIANA ETHICS ADMINISTRATION CAMPAIGN FINANCE RECEIVED 2004 DEC 22 PM 12:17

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 Orleans Levee Board

Address Suite 209 Administration Bldg., 6001 Stars and Stripes Blvd. New Orleans, LA 70126-8002

Business or purpose Political Subdivision

Does this person pay you? YES

If No, who pays you?

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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

Form 500, Rev. 10/2002