LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

Lobbyist Registration Number

FOR OFFICE USE ONLY
Postmark Date: 01/18/05
Ren. 2005
J#4065
$110.00 WT

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 Steimel (Last) George (First) F. (MI)

2. BUSINESSPHONE (225) 274-1387 (Area Code and Phone Number)

3. BUSINESS ADDRESS 15453 Patricia Dale (Street and No.) Baton Rouge (City), LA (State) 70819 (Zip)

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

4. EMPLOYER Steimel & Steimel

5. EMPLOYER'S ADDRESS 15453 Patricia Dale (Street and No.) BR (City), LA (State) 70819 (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 Data Recognition Corp.

Address 13490 Bass Lake Road, Maple Grove, MN 55311

Business or purpose Educational Testing

Does this person pay you? Yes

If No, who pays you? _____

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ETHICS ADMINISTRATION
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Form 500, Rev. 10/2002

LOBBYING REGISTRATION FORM

2. Name Louisiana Assn. of Criminal Defense Lawyers
   Address P.O. Box 82531 Baton Rouge, LA 70810
   Business or purpose Criminal Defense Lawyers
   Does this person pay you? Yes
   If No, who pays you?

3. Name Louisiana Justice of the Peace & Constables Assn.
   Address PO Box 1133; Covington LA 70434
   Business or purpose Justice of the Peace & Constables
   Does this person pay you? Yes
   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

Form 500, Rev. 10/2002