LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

890
Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 01/18/05

Re
J# 1073
$110.00 WT

1041809

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 Breaux, Jr. (Last) John (First) B (MI)

2. BUSINESS PHONE 202-216-8906 (Area Code and Phone Number)

3. BUSINESS ADDRESS 607 14th St., N.W., Ste 500, Washington, D.C. 20005 (Street and No. / City / State / Zip)

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

4. EMPLOYER Self

5. EMPLOYER'S ADDRESS _____ (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 Bell South Corporation

Address 365 Canal St. New Orleans, LA 70130

Business or purpose Telecommunications

Does this person pay you? Yes

If No, who pays you? _____

ETHICS ADMINISTRATION
CAMPAIGN FINANCE
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2005 JAN 21 PM 12:25

Form 600, Rev. 10/2002

LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

990
Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: ~~01/12/05~~ 01/28/05
Re
J# 1073
$110.00 WT

AMENDMENT

1041809

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 Breaux, Jr. John B
Last First MI

2. BUSINESS PHONE 201-216-8906
Area Code and Phone Number

3. BUSINESS ADDRESS 607 14th St., N.W., Ste. 500, Washington, D.C. 20005
Street and No. City State Zip

MAILING ADDRESS 607 14th St. N.W., Ste. 500 Washington, D.C. 20005
Street and No. City State Zip

4. EMPLOYER Self

5. EMPLOYER'S ADDRESS 607 14th St N.W., Ste 500 Washington, D.C. 20005
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 Bellsouth Corporation

Address 365 Canal St. New Orleans, LA 70130

Business or purpose Telecommunications

Does this person pay you? Yes

If No, who pays you?

Form 500, Rev. 10/2002

2005 JAN 31 PM 2:31
ETHICS ADMINISTRATION
CAMPAIGN FINANCE
RECEIVED

2005 JAN 21 PM 12:25
ETHICS ADMINISTRATION
CAMPAIGN FINANCE
RECEIVED

LOBBYING REGISTRATION FORM

Lobbyist's Registration Number

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

LOBBYING REGISTRATION FORM

Lobbyist's Registration Number

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?_____

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Signature of Lobbyist

AMENDMENT

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Form 500, Rev. 10/2002