LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

[redacted]

FOR OFFICE USE ONLY
Postmark Date: ~~02/15/05~~ 02/17/05
Reg. 2005
V#1309
$110.00US

AMENDMENT

[illegible]

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 Adcock, Sr. (Last) Herschel (First) C. (MI)

2. BUSINESS PHONE 225 761 9191 (Area Code and Phone Number)

3. BUSINESS ADDRESS 10915 Perkins Road, Suite C, Baton Rouge, LA 70810 (Street and No. / City / State / Zip)

MAILING ADDRESS Same as above (Street and No. / City / State / Zip)

4. EMPLOYER Self

5. EMPLOYER'S ADDRESS Same as above (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 La. Consumer Finance Assn.

Address 10915 Perkins Road, Suite C., Baton Rouge, LA 70810

Business or purpose Business association

Does this person pay you? Yes

If No, who pays you?

2005 FEB 15 PM 3:44
ETHICS ADMINISTRATION
CAMPAIGN FINANCE
RECEIVED

HAND DELIVERED

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Lobbying Registration Number

FOR OFFICE USE ONLY
Postmark Date: 03/15/05
Reg. 2005
V#1309
$110.00WK

1000213

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1. NAME Adcock, Sr. (Last) Herschel (First) C. (MI)

2. BUSINESSPHONE 225 761 9191 (Area Code and Phone Number)

3. BUSINESS ADDRESS 10915 Perkins Road, Suite C, Baton Rouge, LA 70810 (Street and No. / City / State / Zip)

MAILING ADDRESS Same as above (Street and No. / City / State / Zip)

4. EMPLOYER _____

5. EMPLOYER'S ADDRESS _____ (Street and No. / City / State / Zip)

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i. Name La. Consumer Finance Assn. ✓

Address 10915 Perkins Road, Suite C., Baton Rouge, LA 70810

Business or purpose Business association

Does this person pay you? Yes

If No, who pays you? _____

ETHICS ADMINISTRATION
CAMPAIGN FINANCE
RECEIVED
2005 FEB 15 PM 3:44

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Form 500, Rev. 10/2002

LOBBYING REGISTRATION FORM

2. Name La. Dealer Services Insurance✓

Address P.O. Box Drawer 83480, Baton Rouge, LA 70884

Business or purpose Insurance services

Does this person pay you? Yes

If No, who pays you?

3. Name The Cowart Group, Inc.✓

Address 10935 Perkins Road, Suite A, Baton Rouge, LA 70810

Business or purpose Governmental relations

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