LOBBYING SUPPLEMENTAL REGISTRATION FORM

To be used for changes to registrations and terminations.

1178
Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 03/31/05
TERM

ETHICS ADMINISTRATION
CAMPAIGN FINANCE
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Instructions

- Print in ink or type.
- Complete form and return to Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge LA 70808, (225) 763-8777 or (800) 842-6630. No fee is required.
- This form must be submitted within 5 days of any changes in your registration form, to add employers or those you represent, or if you cease all activities requiring registration. It must be submitted within 10 days of any terminations of employment or representations.

1. NAME Mosely (Last) Katherine (First) B (MI)

2. BUSINESS PHONE 504-837-1171

3. BUSINESS ADDRESS 2450 Severn Ave Suite 210 (Street and No.) Metairie, La (City, State) (Zip)

MAILING ADDRESS Same (Street and No.) (City, State, Zip)

4. EMPLOYER Metropolitan Hospital Council of New Orleans

5. EMPLOYER'S ADDRESS Same (Street and No.) (City, State, Zip)

6. Have you ceased or terminated all lobbying activities requiring registration? Yes X No ____

7. LIST BELOW (a) Names of persons, groups, or organizations which you are adding or eliminating; (b) the address of each such person, group, or organization listed; (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; and (e) the date of termination if applicable.

1. Name American Express Company
Address 200 Vesey Street 48th Floor New York, NY 10285
Business or purpose Financial Services

☐ New Representation
Does this person pay you? NO
If No, who pays you? Jones Walker

☒ Terminated Representation as of 3/1/05

HAND DELIVERED

Form 501, Rev. 10/2002

SUPPLEMENTAL REGISTRATION FORM

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2. Name Catalyst Rx
Address 800 King Farm Blvd. Rockville, MD 20850
Business or purpose
☐ New Representation
Does this person pay you? NO
If No, who pays you? Jones Walker
☒ Terminated Representation as of 3/1/05

3. Name Cendant Corporation
Address 1 Sylvan Way Parsippany, NJ 07054
Business or purpose Taxes, Real Estate + Financial
☐ New Representation
Does this person pay you?
If No, who pays you? Jones Walker
☒ Terminated Representation as of 3/1/05

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.

Katherine Mosely
Signature of Lobbyist

Form 501, Rev. 10/2002

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2. Name Cingular Wireless L.L.C.
Address 5565 Glenridge Connector 17th Floor Atl, GA 30342
Business or purpose Telecommunications

☐ New Representation
Does this person pay you? NO
If No, who pays you? Jones Walker

☒ Terminated Representation as of 3/1/05

3. Name Delaware North Companies Inc.
Address 40 Fountain Plaza, Buffalo, NY 14202
Business or purpose Entertainment, Tourism & Food Services

☒ New Representation
Does this person pay you? yes
If No, who pays you?

☐ Terminated Representation as of

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Katherine Mosely
Signature of Lobbyist

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2. Name Devon Energy Co.
Address 20 N. Broadway Suite 1500 Oklahoma, OK 73102
Business or purpose Oil & Gas Products

☐ New Representation
Does this person pay you? No
If No, who pays you? Jones Walker
☒ Terminated Representation as of 2/1/05

3. Name Jones Walker Waechter Poitevent & Carrere
Address 8555 United Plaza Blvd B.R. La 70809
Business or purpose Law Firm

☐ New Representation
Does this person pay you? Yes
If No, who pays you?
☒ Terminated Representation as of 3/2/05

CERTIFICATION OF ACCURACY

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KB Moser
Signature of Lobbyist

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2. Name National Assoc. of Public Insurance Adjusters
Address 21165 Whitfield Place #105 Potomac Falls, Va 20165
Business or purpose Trade Association

☐ New Representation
Does this person pay you? No
If No, who pays you? Jones Walker
☒ Terminated Representation as of 3/1/05

3. Name New Orleans Public Belt Railroad
Address P.O. Box 51658 N.O. La 70150
Business or purpose

☐ New Representation
Does this person pay you? No
If No, who pays you? Jones Walker
☒ Terminated Representation as of 3/1/05

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[signature]
Signature of Lobbyist

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2. Name Property & Casualty Insurance Association
Address 2600 River Road Des Plaines, IL 60018
Business or purpose Trade Association

☐ New Representation
Does this person pay you? No
If No, who pays you? Jones Walker
☒ Terminated Representation as of 2/4/05

3. Name
Address
Business or purpose
☐ New Representation
Does this person pay you?
If No, who pays you?
☐ Terminated Representation as of

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Signature of Lobbyist

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