LOBBYING SUPPLEMENTAL REGISTRATION FORM

To be used for changes to registrations and terminations.

440
Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 10/31/05
LSUPP

AMENDMENT

105126

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 SPRADLEY THOMAS J
Last First MI

2. BUSINESS PHONE 225-766-1359

3. BUSINESS ADDRESS _____
Street and No. City State Zip

MAILING ADDRESS P.O. Box 85135 Baton Rouge LA 70884
Street and No. City State Zip

4. EMPLOYER SPRADLEY & SPRADLEY INC

5. EMPLOYER'S ADDRESS SAME
Street and No. City State Zip

6. Have you ceased or terminated all lobbying activities requiring registration? Yes_____ 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 SPRINT CORP
Address KANSAS CITY
Business or purpose TELECOMMUNICATIONS

☐ New Representation
Does this person pay you?_____

If No, who pays you?_____

☒ Terminated Representation as of Oct 13 2005

2005 OCT 31 4:08

2005 OCT 12 PM 4:10

Form 101, Rev. [illegible]

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1. NAME SPRADLEY (Last) THOMAS (First) J (MI)

2. BUSINESS PHONE 225-766-1359

3. BUSINESS ADDRESS _____ (Street and No.) (City) (State) (Zip)

MAILING ADDRESS P.O. Box 85185 (Street and No.) Baton Rouge (City) LA (State) 70884 (Zip)

4. EMPLOYER SPRADLEY & SPRADLEY INC

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

6. Have you ceased or terminated all lobbying activities requiring registration? Yes_____ 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 SPRINT CORP
Address KANSAS CITY
Business or purpose TELECOMMUNICATIONS

☐ New Representation
Does this person pay you?_____

If No, who pays you?_____

☒ Terminated Representation as of Oct 13 2005

2005 OCT 12 PM 4:10

Form 601, Rev. 10/2002

SUPPLEMENTAL REGISTRATION FORM

Lobbyist's Registration Number

2. Name _____

Address _____

Business or purpose _____

☐ New Representation
Does this person pay you? _____

If No, who pays you? _____

☐ Terminated Representation as of _____

3. Name _____

Address _____

Business or purpose _____

☐ New Representation
Does this person pay you? _____

If No, who pays you? _____

☐ Terminated Representation as of _____

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 601, Rev. 10/2002

AMENDMENT