LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

1267

Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 11/07/05

Reg. 2005
229920
$110.00 wg

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 FIDLER, GERALD F.
   Last First MI

2. BUSINESS PHONE 202-429-1191
   Area Code and Phone Number

3. BUSINESS ADDRESS 1625 L. Street, NW. Washington, DC 20036
   Street and No. City State Zip

   MAILING ADDRESS 1625 L. Street, NW. Washington, DC 20036
   Street and No. City State Zip

4. EMPLOYER American Federation of State, County & Municipal Employees (AFSCME)

5. EMPLOYER'S ADDRESS 1625 L. Street, NW. Washington, DC 20036
   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 American Federation of State, County & Municipal Employees (AFSCME)

      Address 1625 L. Street NW. Washington, DC 20036

      Business or purpose Labor Union

      Does this person pay you? Yes

      If No, who pays you? —

Form 500, Rev. 10/2007

HAND DELIVERED

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2. Name AFSCME Council 17

Address 429 Government Street, Baton Rouge, LA 70802

Business or purpose Labor Union

Does this person pay you? NO

If No, who pays you? American Federation of State, County & Municipal Employees (AFSCME)

3. Name

Address

Business or purpose N/A

Does this person pay you?

If No, who pays you?

4. Name

Address

Business or purpose N/A

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

Form 500, Rev. 10/2002