LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

2006

167

Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 01/17/06
Ren. 2006
#4623
$110.00 US

1060173

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 BURGIN (Last) R. (First) JANE (MI)

2. BUSINESS PHONE 504 782 5000 (Area Code and Phone Number)

3. BUSINESS ADDRESS P.O. BOX 1436, ABITA SPRINGS, LA 70420 (Street and No. / City / State / Zip)

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

4. EMPLOYER BURGIN & ASSOCIATES

5. EMPLOYER'S ADDRESS SAME (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 SOCIETY OF PROFESSIONAL SURVEYORS ✓

Address 9643 BROOKLINE ABE., SUITE 108, BATON ROUGE, LA 70808

Business or purpose SURVEYING AND MAPPING

Does this person pay you? YES

If No, who pays you?

Form 500, Rev. 10/2002

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2. Name GIRL SCOUT COUNCILS OF LOUISIANA

Address 1720 KALISTE SALOOM RD., STE. C-1, LAFAYETTE, LA

Business or purpose YOUTH ORGANIZATION

Does this person pay you? YES

If No, who pays you?

3. Name BURGIN & ASSOCIATES

Address P.O. BOX 1436, ABITA SPRINGS, LA 70420

Business or purpose GOVERNMENTAL AFFAIRS

Does this person pay you? YES

If No, who pays you?

4. Name LA. ASSO. OF SUBSTANCE ABUSE COUNSELORS & TRAINERS (LASACT)

Address P.O. BOX 80235, BATON ROUGE, LA 70898

Business or purpose COUNSELING

Does this person pay you? YES

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.

K. Jane Burgin
Signature of Lobbyist

ATTACH
2" x 2"
PHOTOGRAPH
HERE
FOR
INITIAL
REGISTRATION
ONLY

Form 600, Rev. 10/2002