LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

49

Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date 01/19/06
Ren. 2006
J#4076
$110.00WS

1000201

2006 JAN 20 AM 10:17

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 Poole (Last) William (First) Blake (MI)

2. BUSINESS PHONE 404-715-2457 (Area Code and Phone Number)

3. BUSINESS ADDRESS Delta Air Lines, Inc. PO Box 20706, Dept. 976 (Street and No.) Atlanta (City) Georgia (State) 30320-6001 (Zip)

MAILING ADDRESS 1030 Delta Blvd., Dept. 976 (Street and No.) Atlanta (City) Georgia (State) 30354 (Zip)

4. EMPLOYER Delta Air Lines, Inc.

5. EMPLOYER'S ADDRESS PO Box 20706, Dept. 976 (Street and No.) Atlanta (City) Georgia (State) 30320-6001 (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.

I. Name Delta Air Lines, Inc. / Doug Blissit - Vice President - Public Affairs

Address PO Box 20706, Dept. 976 Atlanta, Georgia 30320-6001

Business or purpose Air passenger and cargo carrier

Does this person pay you? Yes

If No, who pays you? N/A

Form 500, Rev. 10/2002

LOBBYING REGISTRATION FORM

Lobbyist's Registration Number

2. Name N/A

Address

Business or purpose

Does this person pay you?

If No, who pays you?

3. Name N/A

Address

Business or purpose

Does this person pay you?

If No, who pays you?

4. Name N/A

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
FOR
INITIAL
REGISTRATION
ONLY

Form 100, Rev. 10/2002