LOBBYING SUPPLEMENTAL REGISTRATION FORM
To be used for changes to registrations and terminations

FOR OFFICE USE ONLY
Postmark Date: 2/14/06
LSUPP

Instructions

- Print in ink or type.
- Complete form and return with $10 fee to Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge LA 70809-7017, (225) 922-1400 or (800) 842-6630.
- 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 ~~Sandra~~ Mapes, Sandra A.
   Last First MI

2. BUSINESS PHONE 225 383.0618

3. BUSINESSADDRESS 731 Lakeland Drive BR, LA 70802
   Street and No. City State Zip

   MAILING ADDRESS _____
   Street and No. City State Zip

4. EMPLOYER Sutton, Mapes, Valverson, 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 LA Association of Health Plans, Inc.
      Address 9467 Bearkiln Ave BR, LA 70809
      Business or purpose Professional Assn

      ☐ New Representation
      Does this person pay you? _____

      HAND DELIVERED

      If No, who pays you? _____

      ☑ Terminated Representation as of June 20, 2004

Form 501, Rev. 5/99

Lobbyist's Registration Number

SUPPLEMENTAL REGISTRATION FORM

2. Name LA Finance Assn
   Address 11918 Brickyard Ave BR, LA 70816
   Business or purpose Professional Assn

   ☑ New Representation
   Does this person pay you? NO
   If No, who pays you? Sutton, Mapes & Yelverton, Inc.

   ☐ Terminated Representation as of _____

3. Name Sutton, Mapes & Yelverton Inc.
   Address 731 Lafayette Drive BR, LA 70802
   Business or purpose Corporation

   ☑ New Representation
   Does this person pay you? yes
   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 501, Rev. 8/99

LOBBYING REGISTRATION FORM

Lobbyist's Registration Number

2. Name Reimbursement Consultants, Inc.

Address 5037 Sunset Blvd Lexington S.C. 29072

Business or purpose Corporation

Does this person pay you? No

If No, who pays you? Sutton, Mayes, & Velvaston, Inc.

3. Name Luxottica Retail

Address P.O. Box 459 Marblehead, OH 43440

Business or purpose Corporation

Does this person pay you? No

If No, who pays you? Mayes & Mayes, Inc.

4. Name LA Farm Bureau Federation

Address 9516 Airline Hwy BR, LA 70815

Business or purpose Professional Assn

Does this person pay you? No

If No, who pays you? Mayes & Mayes, Inc.

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Signature of Lobbyist

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

Form 900, Rev. 7/2001

LOBBYING REGISTRATION FORM

Lobbyist's Registration Number

2. Name LA Life Safety Security Assn

Address 100 Beavais Ave, Ste A2, Lafayette, LA 70507

Business or purpose Professional Assn

Does this person pay you? No

If No, who pays you? Mapes Mapes, Inc

3. Name LA Assn of Fire Casualty Companies

Address 731 Lakeland Dr BR, LA 70802

Business or purpose Professional Assn

Does this person pay you? No

If No, who pays you? Mapes Mapes, Inc.

4. Name L.S.U. Foundation

Address

Business or purpose Professional Assn

Does this person pay you? NO

If No, who pays you? Mapes Mapes, Inc.

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Signature of Lobbyist

ATTACH
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PHOTOGRAPH
HERE
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Form 500, Rev. 7/2001

LOBBYING REGISTRATION FORM

Lobbyist's Registration Number

2. Name LA Collectors Assn

Address P.O. Box 7582 Shreveport, LA 71137

Business or purpose Professional Assn

Does this person pay you? No

If No, who pays you? Mayes · Mayes, Inc.

3. Name Lake Charles Pilots Assns

Address 4902 Ihles Rd, Lake Charles LA 70605

Business or purpose Professional Assn

Does this person pay you? No

If No, who pays you? Mayes · Mayes, Inc.

4. Name Bell South Telecommunications, Inc.

Address 365 Canal St, New, LA Ste 3000 70140

Business or purpose Corporation

Does this person pay you? No

If No, who pays you? Sutton, Mayes, · Velvertson, Inc.

CERTIFICATION OF ACCURACY

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Signature of Lobbyist

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Form 100, Rev. 7/2001