LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

114

Lobbyist's Registration Number

FOR OFFICE USE ONLY
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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 Basde Arwin P.
Last First MI

2. BUSINESS PHONE 504 - 864-0280
Area Code and Phone Number

3. BUSINESS ADDRESS 2503 Pine Street, New Orleans LA 70125
Street and No. City State Zip

MAILING ADDRESS Same
Street and No. City State Zip

4. EMPLOYER Arwin P. Basde, LLC

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 See attached

Address

Business or purpose

Does this person pay you?

If No, who pays you?

Form 500, Rev. 10/2002

6.

Louisiana Association of Broadcasters
660 Florida Boulevard
Baton Rouge, LA 70802
Trade association
Yes

Louisiana Asphalt Pavement Association
9447 Brookline Avenue
Baton Rouge, LA 70809
Trade association
Yes

Louisiana Energy and Power Authority
210 Venture Way
Lafayette, LA 70507
Municipally owned wholesale power sales and services
Yes

Tulane University/Tulane University Health Sciences
1440 Canal Street, Suite 2400
New Orleans, LA 70112
Higher education/health care education and services
Yes

Home for the Incurables
612 Henry Clay
New Orleans, LA 70118
Non-profit
Yes

Louisiana/Mississippi Hospice and Palliative Care Organization
717 Kerlerec
New Orleans, LA 70116
Trade association
Yes

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Lobbyist's Registration Number

2. Name_____

Address_____

Business or purpose_____

Does this person pay you?_____

If No, who pays you?_____

3. Name_____

Address_____

Business or purpose_____

Does this person pay you?_____

If No, who pays you?_____

4. Name_____

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 500, Rev. 10/2002