LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

LOB1110
Lobbyist's Registration Number

SCANNED
MAR 1 5 2007
By: JM

FOR OFFICE USE ONLY
Postmark Date: 2-8-07
Ren 2007
√#5600038048
$110
Wmi

1062201

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 Beaver (Last) Debbie (First) L. (MI)

2. BUSINESS PHONE 918-573-4326 (Area Code and Phone Number)

3. BUSINESS ADDRESS One Williams Center, 48th FL. (Street and No.) Tulsa (City) OK (State) 74172 (Zip)

MAILING ADDRESS P.O. Box 2400, Attn: Charlene Stanford, (Street and No.) Tulsa (City) OK (State) 74102 (Zip)

4. EMPLOYER The Williams Companies

5. EMPLOYER'S ADDRESS One Williams Center, (Street and No.) Tulsa (City) OK (State) 74172 (Zip)

2007 FEB -9 PM 2:30
ETHICS ADMINISTRATION
CAMPAIGN FINANCE
RECEIVED

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 The Williams Companies & its Subsidiaries

Address One Williams Center, Tulsa OK 74172

Business or purpose Gathering, processing, & transmission of natural gas

Does this person pay you? Yes

If No, who pays you? _____

Form 510, Rev. 10/2002

LOBBYING REGISTRATION FORM

LOB110
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 600, Rev. 10/2002