LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

1365

Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 4-9-07
Rec 2007
✓ #282
$110
wmi

1062381

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 LeBouef (Last) Kelly (First) A. (MI)

2. BUSINESS PHONE 985-445-3897 (Area Code and Phone Number)

3. BUSINESS ADDRESS 763 NORTH ST. (Street and No.) BATON ROUGE, LA (City) 70802 (State) (Zip)

MAILING ADDRESS 763 NORTH ST. (Street and No.) BATON ROUGE, LA (City) 70802 (State) (Zip)

4. EMPLOYER LOUISIANA CABLE + TELECOMMUNICATION ASSN.

5. EMPLOYER'S ADDRESS 763 NORTH ST. (Street and No.) BATON ROUGE, LA (City) 70802 (State) (Zip)

2007 APR 11 PM 12:26

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 CHERYL McCORMICK

Address 763 NORTH ST. BATON ROUGE LA 70802

Business or purpose TELECOMMUNICATIONS LOGISLATION

Does this person pay you? YES

If No, who pays you?

Form 1/C, Rev. 10/2002

RCS: 4/27/07 PAB

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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

Form 500, Rev. 10/2002

[redacted]