# LOBBYING REGISTRATION FORM

**To be used for initial registrations and renewals.**

1375
**Lobbyist's Registration Number**

**FOR OFFICE USE ONLY**
Postmark Date: 4/30/07
07 Reg
✓ $110

1070035

## 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 Roemer (Last), Charles (First) Elson (MI)

2. BUSINESS PHONE (225) 268-6652 (Area Code and Phone Number)

3. BUSINESS ADDRESS 5710 Corporate Blvd. (Street and No.), Baton Rouge (City), LA (State) 70808 (Zip)

MAILING ADDRESS 7880 WALDEN RD. (Street and No.), Baton Rouge (City), LA (State) 70808 (Zip)

4. EMPLOYER Business First Bank

5. EMPLOYER'S ADDRESS 5710 Corporate Blvd. (Street and No.), Baton Rouge (City), LA (State) 70808 (Zip)

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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 (A) Roemer Development LLC.
(B) 7880 WALDEN Road (home)
Address
(C) Assisting in development of University Pointe (CCRC) on
Business or purpose River Road, Baton Rouge, LA.

Does this person pay you? No

If No, who pays you? No one in this regard or to lobby for this or any other regard.

Form 300, Rev. 4/2002

HAND DELIVERED

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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 _____

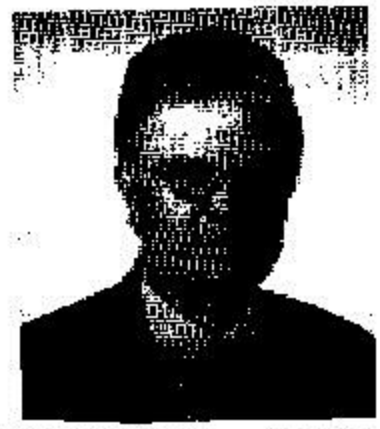
   Does this person pay you? _____

   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



Form 500, Rev. 10/2003