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LOBBYING SUPPLEMENTAL REGISTRATION FORM

To be used for changes to registrations and terminations.

2007

Instructions

- Print in ink or type.
- Complete form and return to Board of Ethics, 2010 Quail Dr., 3rd Floor, Baton Rouge LA 70808, (225) 765-0777 or (225) 765-0778. No fee is required.
- This form must be submitted within 5 days of any changes in your registration date, 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 representation.

FOR OFFICE USE ONLY
Postmark Date: 4/30/07
LSUPP

SCANNED
MAY 09 2007
By: [illegible]
1070096

1. NAME Spradley Thomas J
Last First Ini

2. BUSINESS PHONE 225-766-1359

3. BUSINESS ADDRESS 528 Hidden Lake Ct Baton Rouge LA 70810
Street No. City State Zip

MAILING ADDRESS PO Box 85125 Baton Rouge LA 70884
Street No. City State Zip

4. EMPLOYER Spradley & Spradley Inc

5. EMPLOYER'S ADDRESS [illegible]
Street 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 affordable; (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 account who says you to lobby; and (e) the date of termination if applicable.

1. Name See attached

Address ____

Business or purpose ____

☐ New Representation
Does this person pay you? ____

If No, who pays you? ____

☐ Terminated Representation as of ____

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[illegible] FINANCE
RECEIVED

Form [illegible]

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[redacted]

SUPPLEMENTAL REGISTRATION FORM

2. Name_____

Address_____

Business or purpose_____

☐ New Representation
Does this person pay you?_____

If No, who pays you?_____

☐ Terminated Representation as of_____

3. Name_____

Address_____

Business or purpose_____

☐ New Representation
Does this person pay you?_____

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

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SUPPLEMENTAL REGISTRATION - THOMAS J. SPRADLEY

Name	National Vehicle Protection Association
Address	7455 Natural Bridge Caverns Rd., Schertz, TX 78154-3210
Business/Purpose	Trade Assn. for Vehicle Protection Device Dealers
New Representation	Yes
Does this person pay you?	Yes