LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

1509
Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 3/31/08
Reg-08
ck# 3666
$110.00

1072154

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 Monte (Last) Curt (First) S. (MI)

2. BUSINESS PHONE (225) 354-1437 (225) 806-0896
Area Code and Phone Number

3. BUSINESS ADDRESS 8011 Merle Gustafson (Street and No.) Baton Rouge (City), La (State) 70807 (Zip)

MAILING ADDRESS 14906 Profit Ave. (Street and No.) Baton Rouge (City) La (State) 70817 (Zip)

4. EMPLOYER ~~Baton Rouge Fire Dept.~~ Baton Rouge Firefighters Assn.

5. EMPLOYER'S ADDRESS ~~8011 Merle~~ 8011 Merle Gustafson (Street and No.) Baton Rouge (City), La (State) 70807 (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 Baton Rouge Fire Fighters Association
   Address 8011 Merle Gustafson Baton Rouge, La 70807
   Business or purpose public safety advocate
   Does this person pay you? YES
   If No, who pays you?

Form 500, Rev. 4/02/02

HAND DELIVERED

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2. Name Professional Fire Fighters Association of La.

Address 9021 Aurora Ln. Shreveport, La 71115

Business or purpose public Safety Advocate

Does this person pay you? NO

If No, who pays you?

3. Name

Address N/A

Business or purpose

Does this person pay you?

If No, who pays you?

4. Name

Address N/A

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 300, Rev. 10/2002