LEGISLATIVE

LOBBYING SUPPLEMENTAL REGISTRATION FORM

To be used for changes to registrations and terminations.

157
Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 8-28-08
Supp. L

1073091

Instructions

- Print in ink or type.
- Complete form and return to Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge LA 70808, (225) 763-8777 or (800) 842-6630. No fee is required.
- This form must be submitted within 5 days of any changes in your registration form, 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 representations.

1. NAME ADAM (Last) GINGER (First) E (MI)

2. BUSINESS PHONE 225.767.5151

3. BUSINESS ADDRESS 10652 Molly Avenue (Street and No.) Baton Rouge (City), LA (State) 70810 (Zip)

MAILING ADDRESS Same (Street and No.) (City) (State) (Zip)

4. EMPLOYER Self-Ginger E. Adam, L.L.C.

5. EMPLOYER'S ADDRESS Same (Street and 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 eliminating; (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 someone else pays you to lobby; and (e) the date of termination if applicable.

1. Name ST. TAMMANY WEST CHAMBER OF COMMERCE
   Address 610 HOLLYCREST BLVD., COVINGTON, LA 70433
   Business or purpose nonprofit business organization

   ☐ New Representation
   Does this person pay you? _____

   If No, who pays you? _____

   ☑ Terminated Representation as of August 28, 2008

Form 501, Rev. 10/2002

HAND DELIVERED

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2. Name NORTHSHORE BUSINESS COUNCIL
Address P.O. BOX 781, MANDEVILLE, LA 70470
Business or purpose nonprofit business organization

☐ New Representation
Does this person pay you?

If No, who pays you?

☑ Terminated Representation as of August 28, 2008

3. Name EAST ST. TAMMANY CHAMBER OF COMMERCE
Address 118 WEST HALL AVENUE, SLIDELL, LA 70460
Business or purpose nonprofit business organization

☐ New Representation
Does this person pay you?

If No, who pays you?

☑ Terminated Representation as of August 28, 2008

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 501, Rev. 10/2002