LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals. Registrations expire on January 31 unless a renewal is submitted between December 1 and January 31.

Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 9/4/98
REG
1980891
98 SEP 8 P1:57
JH 1290
$10.00
Wmi

Instructions

- Print in ink or type.
- Complete form, have it notarized and return with $10 registration fee to the Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge, LA 70809-7017, (504) 922-1400.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Renewals must be submitted between December 1 and January 31.

1. NAME Duncan (Last) Ronnie (First) E. (MI)

2. BUSINESS PHONE 225-765-7017 (Area Code and Phone Number)

3. BUSINESS ADDRESS 2041 Silverside Dr. (Street and No.) Baton Rouge (City) LA (State) 70808 (Zip)

4. EMPLOYER Catholic Health Association of Louisiana

5. EMPLOYER'S ADDRESS 2041 Silverside Dr. (Street and No.) Baton Rouge (City) LA (State) 70808 (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 Catholic Health Association of Louisiana

   Address 2041 Silverside Dr. Baton Rouge, LA 70808

   Business or purpose Association

   Does this person pay you? Yes

   If No, who pays you? _____

2. Name _____

   Address _____

   Business or purpose _____

   Does this person pay you? _____

   If No, who pays you? _____

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Lobbyist's Registration Number

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? _____

5. Name _____

Address _____

Business or purpose _____

Does this person pay you? _____

If No, who pays you? _____

State of LOUISANA

Parish of EAST BATON ROUGE

Before me, the undersigned authority, personally came and appeared RONNIE R. DUNCAN who, after being duly sworn by me, did declare and acknowledge to me that the above statements are true and correct.

Signature of Lobbyist

Sworn to and subscribed before me on this 2nd day of September, 1998.

Notary Public

Rev. 8/97