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.

393
Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 11-30/98
REG
1981213
√#1546
$1000
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 Bishop (Last) Cindy (First) G. (MI)
2. BUSINESS PHONE (504) 923-1599 (Area Code and Phone Number)
3. BUSINESS ADDRESS P.O. Box 80053 (Street and No.) Baton Rouge (City) LA (State) 70898 (Zip)
4. EMPLOYER Self-employed
5. EMPLOYER'S ADDRESS Same As above (Street and No.) (City) (State) (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 La. Society of Anesthesiologists
   Address 5114 Lost Oak Drive, Baton Rouge LA 70817
   Business or purpose non-profit, professional membership organization
   Does this person pay you? YES
   If No, who pays you?
2. Name La Orthopaedic Association
   Address 3900 N. Causeway Blvd # 1470 Metairie LA 70002
   Business or purpose
   Does this person pay you? YES
   If No, who pays you? non-profit, professional membership organization

HAND DELIVERED

ATTACHMENT D-18

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3. Name Common Cause / Louisiana

Address 1250 Connecticut Ave, NW WDC 20036

Business or purpose non profit advocacy group

Does this person pay you? YES

If No, who pays you? professional Advocacy organization

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 Louisiana

Parish of East Baton Rouge

Before me, the undersigned authority, personally came and appeared Cindy G. Bishop, 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 19th day of January, 1997.

Notary Public

Rev. 8/97

ATTACH 2" x 2" PHOTOGRAPH HERE FOR INITIAL REGISTRATION ONLY