LOBBYING SUPPLEMENTAL REGISTRATION FORM

To be used for changes to registrations and terminations.

Lobbyist Registration Number

Instructions

- Print in ink or type.
- Complete form, have it notarized and return with $10 fee to Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge LA 70809-7017, (504) 922-1400.
- 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.

FOR OFFICE USE ONLY
Postmark Date: 9-2-98
LSOPP
1981535
98 SEP 2 P3:07
ETHICS
√# 5311
$10.00
wmi

1. NAME Smith (Last) James (First) A (MI)
2. BUSINESS PHONE 504-927-8837
3. BUSINESS ADDRESS 9412 Common #5 (Street and No.) B.R. (City), LA. (State) 70809 (Zip)
4. EMPLOYER LA. RETIRED TEACHERS ASSOC.
5. EMPLOYER'S ADDRESS 9412 Common ST. (Street and No.) B.R. (City), LA. (State) 70809 (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 LA. RETIRED TEACHERS ASSOC.

   Address 9412 COMMON ST. #5, B.R., LA 70809

   Business or purpose PROTECT TEACHER RETIREE BENEFITS

   ☐ New Representation
   Does this person pay you? ____

   If No, who pays you? ____

   ☑ Terminated Representation as of September 8, 1998

HAND DELIVERED

SUPPLEMENTAL REGISTRATION FORM

Lobbyist's Registration Number

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 _____

State of Louisiana

Parish of East Baton Rouge

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

James A. Smith
Signature of Lobbyist

Sworn to and subscribed before me on this 2nd day of ~~August~~ Sept., 1998.

John L. Stone III
Notary Public

Rev. 8/97