LOBBYING REGISTRATION FORM

be used for initial registrations and renewals. Registrations expire on January 31 unless a renewal is submitted between December 1 and January 31. 1999

442
Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: _____
Reg 17/18/98
1981908
V#1738
$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, (225) 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 Risinger, William C _____ (Last / First / MI)

2. BUSINESS PHONE 318-445-5319 (Area Code and Phone Number)

3. BUSINESS ADDRESS 3908 Parliament Drive Alexandria, La. 71303 (Street and No. / City / State / Zip)

4. EMPLOYER ✓ Advise & Consult, I.

5. EMPLOYER'S ADDRESS 3908 Parliament Drive, Alexandria, La. 71303 (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 ✓ Louisiana State Association of Optometrists

   Address 115 B North 13th Oakdale, La. 71463

   Business or purpose Promote visual health of Louisiana residents and maintain integrity of the Optometric Profession

   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? _____

ATTACHMENT D-18

LOBBYING REGISTRATION FORM

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 Louisiana

Parish of Rapides

Before me, the undersigned authority, personally came and appeared William C. Risinger, JR, who, after being duly sworn by me, did declare and acknowledge to me that the above statements a

William C. Ri

Signature of Lobbyist

Sworn to and subscribed before me on this 16 day of December, 19 78.

Janie S. Beard

Notary Public

Rev. 8/97

1738

ADVISE & CONSENT
PH. 318-442-5602 FAX 318-445-0806
P.O. BOX 13402
ALEXANDRIA, LA 71316-3402

04-26/652

12/17 1998

PAY TO THE ORDER OF Board of Ethics $10.00

Ten and no/100 DOLLARS

Security Bank

FOR

Mrs W C Risinger Jr

⑈001738⑈ ⑆065200285⑆ 0088684⑈

LOUISIANA BOARD OF ETHICS
SUITE 200
8401 UNITED PLAZA BLVD.
BATON ROUGE, LA 70809

Receipt

Date 12/22/98 No. 435747

RECEIVED FROM William C. Risinger $10.00

Ten + no/100 DOLLARS

FOR RENT
FOR 1999 Lobbying Registration (#442)

FROM TO

ACCOUNT		
PAYMENT	10	00
BALANCE DUE		

○ cash
✓ check #1738
○ money order

BY W. Ingram

TC1182

STATE OF LOUISIANA
DEPARTMENT OF STATE CIVIL SERVICE
LOUISIANA BOARD OF ETHICS
8401 UNITED PLAZA BOULEVARD
SUITE 200
BATON ROUGE, LA 70809-7017
(225) 922-1400
FAX: (225) 922-1414

December 29, 1998

William C. Risinger
3908 Parliament Drive
P.o. Box 13402
Alexandria, La 71303

Dear Lobbyist:

The Louisiana Board of Ethics received your Lobbyist Registration Form. Your Registration was accepted and filed. You have been assigned Lobbyist Registration Number **442** for the year 1999. I have enclosed a receipt for your registration fee.

If you have any questions, please feel free to contact the staff of the Ethics Administration Program.

Very truly yours,

LOUISIANA BOARD OF ETHICS

Kathy Dedon/wm

Kathy Dedon

Enclosure