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. 1999

Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 12/4/98
Reg
1981918
V# 2443
$1000
WMS

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 Stigall, Constance B.
   Last First MI

2. BUSINESS PHONE (225) 344-8839
   Area Code and Phone Number

3. BUSINESS ADDRESS P.O. Box 66924, Baton Rouge, LA 70896
   Street and No. City State Zip

4. EMPLOYER Louisiana Psychological Association

5. EMPLOYER'S ADDRESS P.O. Box 66924, Baton Rouge, LA 70896
   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 Psychological Association

      Address P.O. Box 66924, Baton Rouge, LA 70896

      Business or purpose Professional organization for psychologists

      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? _____

LOBBYING REGISTRATION FORM

85
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 East Baton Rouge

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

Constance B. Stigall
Signature of Lobbyist

Sworn to and subscribed before me on this 11 day of December, 19 98.

Notary Public

Rev. 8/97

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

LOUISIANA PSYCHOLOGICAL ASSOCIATION
OFFICE OF THE TREASURER
MURELLE G. HARRISON, PH.D.
10733 MALCOLM DR.
BATON ROUGE, LA 70811

84-11/654
000726303

2443

DATE 12-11-98

PAY TO THE ORDER OF Louisiana Board of Ethics $ 10.00

Ten and no/100 DOLLARS

CNB CITY NATIONAL BANK OF BATON ROUGE
Baton Rouge, Louisiana

MEMO

Murelle G. Harrison

⑆065400111⑆ 0007 26303⑈ 2443

Receipt

Date 12/16/98 No. 435732

RECEIVED FROM Constance B. Stigall $10.00

Ten + no/100 DOLLARS

FOR RENT
FOR 1999 Lobbying Registration (#85)

FROM TO

ACCOUNT	
PAYMENT	10 00
BALANCE DUE	

✓ cash
check #2443
money order

BY W. Ingram

1C1187

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 30, 1998

Constance B. Stigall
P. O. Box 66924
Baton Rouge, La 70896

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 **85** 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

Kathy Dedon

Enclosure