573

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: 12/18/98
Reg

1981955

V# 18044-442888
wmi
$40.00

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 Reitz (Last) Mike (First) (MI)

2. BUSINESS PHONE (225) 295-2148 (Area Code and Phone Number)

3. BUSINESS ADDRESS 5525 Reitz Avenue, Baton Rouge, LA 70809-3802 (Street and No. / City / State / Zip)

4. EMPLOYER Blue Cross and Blue Shield of Louisiana

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 Louisiana Health Service & Indemnity Company

   Address 5525 Retiz Avenue, Baton Rouge, LA 70809-3802

   Business or purpose Health Insurance

   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 East Baton Rouge

Before me, the undersigned authority, personally came and appeared Mike Reitz, 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 30 day of November, 19 98.

Notary Public

Rev. 8/97

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

BlueCross BlueShield of Louisiana

An Independent Licensee of the Blue Cross and Blue Shield Association

Louisiana Health Service & Indemnity Company
P.O. BOX 98029 BATON ROUGE, LOUISIANA 70898-9029

18044-442888

To: WHITNEY NATIONAL BANK
BATON ROUGE, LOUISIANA

Twenty dollars And 00/100 **********

PAY TO THE ORDER OF:

Date	Payment Amount
12/16/98	**********20.00

Louisiana Health Service & Indemnity Company
ADMINISTRATIVE ACCOUNT

BOARD OF ETHICS
8401 UNITED PLAZA BLVD.
SUITE 200
BATON ROUGE LA 70809-7017

⑈ 442888 ⑈ ⑆065000171⑆ 16512013989 ⑈

BOARD OF ETHICS
8401 UNITED PLAZA BLVD.
SUITE 200
BATON ROUGE LA 70809-7017

Vendor ID / Location	Reference Number
54782 - 000	442888

Invoice Number	Invoice Date	Gross Amount	Discount Amount	Withholding Amount	Net Amount
M REITZ- M CALANDRO	12/16/98	20.00	ZERO	ZERO	20.00

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

Receipt Date 12/22/98 No. 435750

RECEIVED FROM LA Health Svc. + Indem. Co. $20.00

Twenty + 00/100 DOLLARS

FOR RENT

FOR 1999 Lobbying Registration

FROM

TO (#69 + #573)

ACCOUNT	
PAYMENT	20.00
BALANCE DUE	

cash
check #18044-442888
money order

BY W. Dugram

1C1182

Totals	20.00	ZERO	ZERO	20.00

3KX1224.1 R 5/96

BlueCross BlueShield of Louisiana

An independent licensee of the Blue Cross and Blue Shield Association.

P.O. Box 98029 – Baton Rouge, Louisiana 70898-9029 – 504/295-2595 – FAX 504/897-2760
Writer's Internet E-Mail Address: HSBCLPMM@HMMAIL.COM

Legal Affairs

December 10, 1998

Board of Ethics
8401 United Plaza Blvd., Suite 200
Baton Rouge, LA 70809-7017

Certified Mail
Z 030 457 371

RE: Lobbyist Registration

Dear Sir or Madam:

Enclosed are Lobbyist Registration forms for Michele S. Calandro and Mike Reitz. Please register both of these individuals as lobbyists for 1999. Also enclosed is a check in the amount of $20.00 to cover the registration fees.

Please feel free to contact me if you need any additional information.

Sincerely,

Penny M. Martin
Paralegal

/pmm
Enclosures

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

Michael H. Reitz
5525 Reitz Avenue
Baton Rouge, La 70809-3802

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 573 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