

PEIC 01.1. NILE 03/2001
12-19-8

LOBBYING SUPPLEMENTAL REGISTRATION FORM

To be used for changes to registrations and terminations.



Instructions

- Print in ink or type.
- Complete form, have it notarized and return with \$10 fee to Board of Ethics, 8401 Unhed 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: 1/30/98

REG
198196D

✓ # 114782
\$10.00
SB

1. NAME Day Linda B.
Last First MI

2. BUSINESS PHONE 504-343-9243

3. BUSINESS ADDRESS 1755 Nicholson Drive Baton Rouge, Louisiana 70802
Street and No. City State Zip

4. EMPLOYER Louisiana Association of Educators

5. EMPLOYER'S ADDRESS P.O. Box 479 Baton Rouge, Louisiana 70821
Street and No. City State Zip

6. Have you ceased or terminated all lobbying activities requiring registration? Yes _____ No X

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 Louisiana Association of Educators

Address 1755 Nicholson Drive Baton Rouge, Louisiana 70802

Business or purpose Educational

New Representation
Does this person pay you? Yes

If No, who pays you? _____

Terminated Representation as of _____

HAND DELIVERED

SUPPLEMENTAL REGISTRATION FORM



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? _____

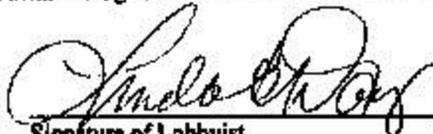
If No, who pays you? _____

Terminated Representation as of _____

State of Louisiana

Parish of East Baton Rouge

Before me, the undersigned authority, personally came and appeared Linda B. Day, 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 22 day of January, 19 98.

Monica Strickland
Notary Public
