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

180
Lobbyist's Registration Number

FOR OFFICE USE ONLY
Postmark Date: 1/19/99
Reg

1990106

√#3881
$10.00
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 Beckstrom (Last) Mark (First) W. (MI)

2. BUSINESS PHONE 504-842-3228 (Area Code and Phone Number)

3. BUSINESS ADDRESS 880 Commerce Road West, (Street and No.) (City) New Orleans, (State) LA (Zip) 70123

4. EMPLOYER Ochsner Medical Institutions

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 Ochsner Clinic

   Address 1514 Jefferson Hwy., New Orleans, LA 70121

   Business or purpose Health Care Services

   Does this person pay you? Yes

   If No, who pays you?

2. Name Alton Ochsner Medical Foundation

   Address 1516 Jefferson Hwy., New Orleans, LA 70121

   Business or purpose

   Does this person pay you? Yes

   If No, who pays you?

LOBBYING REGISTRATION FORM

180
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 Jefferson

Before me, the undersigned authority, personally came and appeared Mark William Beckstrom, 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 13th day of January, 1999.

Notary Public

Rev. 8/97

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

3881

MARK BECKSTROM OR
JOAN THOMPSON-BECKSTROM 0987
LADI HIS 005230707 HERS 003728630
237 RICHLAND DR E
MANDEVILLE, LA 70448

Jan 15 1999

PAY TO THE ORDER OF Board of Ethics $ 10.00

Ten dollars and 00/100 DOLLARS

HIBERNIA NATIONAL BANK
JEFFERSON PARISH, LOUISIANA

FOR

⑆065405132⑆88 10⑈0569 7⑈ 3881

Receipt

Date 1/21/99

No. 436381

RECEIVED FROM Mark Beckstrom $10.00

Ten and 00 DOLLARS

FOR RENT

✓ FOR 1999 lobbying registration

FROM TO

ACCOUNT	
PAYMENT	10
BALANCE DUE	

cash
✓ check # 3881
money order

BY K Dedon

101182

LOUISIANA
6401 LINE
BATON

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

January 21, 1999

Mark W. Beckstrom
880 Commerce Road West
New Orleans, La 70123

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 **180** 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