LOBBYING SUPPLEMENTAL REGISTRATION FORM

To be used for changes to registrations and terminations.

Lobbyist's Registration Number: 4197

Instructions

- Print in ink or type.
- Complete form, have it notarized and return with $10 fee to Board of Ethics, 8401 United Plaza Blvd., Suite 200 Baton Rouge LA 70809-7017, (225) 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: 7-20-99
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ETHICS

1. NAME Harper (Last) Patti (First) Thomas (MI)
2. BUSINESS PHONE 318-681-6702
3. BUSINESS ADDRESS One St. Mary (Street and No.), Shreveport (City), La (State) 71101 (Zip)
4. EMPLOYER Christus Schumpert Health
5. EMPLOYER'S ADDRESS One St. Mary (Street and No.), Shreveport (City), La. (State) 71101 (Zip)
6. Have you ceased or terminated all lobbying activities requiring registration? Yes____ No____
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 Sisters of Charity Schumpert
   Address One St. Mary Place
   Business or purpose Healthcare System
   ☐ New Representation
   Does this person pay you?____
   If No, who pays you?____
   ☑ Terminated Representation as of Jan 31, 1999

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2. Name Christus Health

Address One St. Mary Place, Shreveport

Business or purpose Health Care System

☑ 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 CADDO

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

Patti Thomas Harper

Signature of Lobbyist

Sworn to and subscribed before me on this 19th day of July, 1999.

Merilee Anne Monk

Notary Public

Rev. 8/97