

LOBBYING REGISTRATION FORM

To be used for initial registrations and renewals.

2180

Lobbyist's Registration Number

FOR OFFICE USE ONLY

Postmark Date: 12-22-99

REG
H# 5580
\$10.00
KSD

1991717

Instructions

- Print in ink or type.
- Complete form 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 or (800) 842-6630.
- Initial registrations must be submitted within 5 days of (1) employment as a lobbyist or (2) first action requiring registration. Registrations expire as of December 31 unless a renewal is submitted between December 1 and January 31.

1. NAME KARAM ROBERT A.
Last First MI

2. BUSINESSPHONE 318-335-4444
Area Code and Phone Number

3. BUSINESS ADDRESS 1950 HWY 165 S OAKDALE, LA 71463
Street and No. City State Zip

MAILING ADDRESS P.O. DRAWER 723 OAKDALE, LA 71463
Street and No. City State Zip

4. EMPLOYER HAB KARAM CONSTRUCTION, INC

5. EMPLOYER'S ADDRESS 1950 HWY 165 S OAKDALE, LA 71463
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 HAB KARAM CONSTRUCTION, INC

Address 1950 HWY 165 S OAKDALE, LA 71463

Business or purpose CONSTRUCTION

Does this person pay you? YES

If No, who pays you? _____

123 2180-01

LOBBYING REGISTRATION FORM

Lobbyist's Registration Number

2. Name OAKWOOD INN DEVELOPMENT, CORP

Address 657 HWY 165 N OAKDALE, LA 71463

Business or purpose MOTEL

Does this person pay you? NO

If No, who pays you? HAB KARAM CONSTRUCTION

3. Name HRK, LLC

Address 951 HWY 165 N, OAKDALE, LA 71463

Business or purpose CONVENIENCE STORE

Does this person pay you? NO

If No, who pays you? HAB KARAM CONSTRUCTION

4. Name _____

Address _____

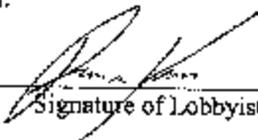
Business or purpose _____

Does this person pay you? _____

If No, who pays you? _____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief, and that no information required by the Lobbyist Disclosure Act [LSA-R.S. 24:50 et seq.] has been deliberately omitted.



Signature of Lobbyist

