

**EXECUTIVE LOBBYING  
REGISTRATION/ RENEWAL FOR  
THE YEAR OF 2006**

(Fill in year.)

372  
Executive Lobbyist Registration No.

**FOR OFFICE USE ONLY**

Postmark Date: 8/2/06

Reg-06

\$110.00

cl#2408133

(PIS)

3060863

**Instructions**

1. Print in ink or type.
2. Complete form and return with \$110 registration fee to the Board of Ethics, 2415 Quail Dr., 3<sup>rd</sup> Floor, Baton Rouge, LA 70808, (225) 763-8777 or (800) 842-6630.
3. 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 Arnone Kym S.  
Last First MI

2. BUSINESS PHONE 212 272 2343  
Area Code and Phone Number

3. FAX NUMBER 212 272 5948

4. BUSINESS ADDRESS 383 Madison Avenue New York, NY 10179  
Street and No. City State Zip

MAILING ADDRESS same as above  
Street and No. City State Zip

5. EMPLOYER Bear, Stearns & Co. Inc.

6. EMPLOYER'S ADDRESS 383 Madison Avenue New York NY 10179  
Street and No. City State Zip

7. 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 Bear, Stearns & Co. Inc.

Address 383 Madison Avenue New York, NY 10179

Business or purpose investment banking and securities trading and brokerage firm

Does this person pay you? yes

If No, who pays you? \_\_\_\_\_

**EXECUTIVE LOBBYING  
REGISTRATION FORM**

372

Executive Lobbyist Registration No.

2. Name \_\_\_\_\_  
Address \_\_\_\_\_  
Business or purpose \_\_\_\_\_  
Does this person pay you? \_\_\_\_\_  
If No, who pays you? \_\_\_\_\_
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? \_\_\_\_\_

**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 LSA-R.S. 49:71 et seq. has been deliberately omitted.

Kim Shure  
Signature of Lobbyist

