(E)

EXECUTIVE LOBBYING REGISTRATION/ RENEWAL FOR THE YEAR OF 2007

(Fill in year.)

458

Executive Lobbyist Registration No.

FOR OFFICE USE ONLY
Postmark Date: 12-29-06
Rec 2007
J#200015398
$110
WMI

SCANNED
APR 09 2007
By
3061627

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ETHICS ADMINISTRATION
CAMPAIGN FINANCE
RECEIVED

Instructions

- Print in ink or type.
- Complete form and return with $110 registration fee to the Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge, LA 70808, (225) 763-8777 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 Patten (Last) Tina (First) M. (MI)

2. BUSINESS PHONE 225-930-7759 (Area Code and Phone Number)

3. FAX NUMBER 225-930-7788

4. BUSINESS ADDRESS 7884 Office Park Blvd., 2nd Floor Baton Rouge 70809 (Street and No. / City / State / Zip)

MAILING ADDRESS SAME AS ABOVE (Street and No. / City / State / Zip)

5. EMPLOYER BellSouth Business Systems, Inc.

6. EMPLOYER'S ADDRESS 7884 Office Park Blvd. 2nd Floor Baton Rouge LA. 70809 (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 BellSouth Corporation and its Affiliates + subsidiaries

Address SAME AS ABOVE

Business or purpose Sales of telecommunications and related services and equipment to large business customers

Does this person pay you? NO

If No, who pays you? BellSouth Business Systems, Inc.

Form 504, Rev. 7/04

Rec: 5/7/07 RPB

HAND DELIVERED

EXECUTIVE LOBBYING REGISTRATION FORM

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.

Signature of Lobbyist

[redacted]