(E)

EXECUTIVE LOBBYING REGISTRATION/ RENEWAL FOR THE YEAR OF _____

(Fill in year.)

498

Executive Lobbyist Registration No.

FOR OFFICE USE ONLY
Postmark Date: 2-28-07
Reg 2007
V# 2444620
$110.
WM.

3061865

2007 FEB 28 AM 11:21

ETHICS COMMISSION
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 Carroll (Last) Timothy (First) F. (MI)

2. BUSINESS PHONE (212) 490-0500 (Area Code and Phone Number)

3. FAX NUMBER _____

4. BUSINESS ADDRESS 383 Madison Ave. (Street and No.) New York (City) NY (State) 10179 (Zip)

MAILING ADDRESS Same as above (Street and No.) (City) (State) (Zip)

5. EMPLOYER Bear Measurisk, LLC

6. EMPLOYER'S ADDRESS 383 Madison Ave. (Street and No.) New York (City) NY (State) 10179 (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 Measurisk, LLC

Address 383 Madison Ave. New York NY 10179

Business or purpose providing risk analytics to investors

Does this person pay you? yes

If No, who pays you? _____

Form 504, Rev. 7/04

Rev: 3/30/07 PAS (needs Ack [illegible])

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