EXECUTIVE LOBBYING EXPENDITURE REPORT

FORM 507

☐ COVERING JANUARY 1 – JUNE 30,_____ - DUE AUGUST 15

☒ COVERING JANUARY 1 - DECEMBER 31, 2007 - DUE FEBRUARY 15

Mail to: the Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge, LA 70808
OR
Fax to: (225)763-8787 or (225)763-8780

452
Executive Lobbyist Registration No.

FOR OFFICE USE ONLY
Postmark Date: 2/13
E-ER 2

3070968

1. Name: Morales (Last) Gilda (First) _____ (MI)

2. Business Address: Suite 400, 3300 W Esplanade Ave, Metairie, LA 70002-9406
Street and No. City State Zip

Mailing Address: Suite 400, 3300 W Esplanade Ave, Metairie La 70002-9406

3. Business Phone: 504 846-7634
Area Code and Telephone Number

4. Total of all executive lobbying expenditures made January 1 through June 30: $ 0
(Include expenditures from Schedules A and B)

5. Total of all executive lobbying expenditures made July 1 through December 31: $ 0
(When Applicable) (Include expenditures from Schedules A and B)

6. Total of all executive lobbying expenditures made during calendar year: $ 0
(Line 4 added to Line 5 should equal Line 6)

7. Did you make an expenditure exceeding $50 on one occasion for an executive branch official:

From January 1 through June 30? Yes ☐ No ☒
From July 1 through December 31? Yes ☐ No ☒ NA ☐

If the answer to either question in Number 7 above is YES, complete Schedule A and attach.

8. Did you make expenditures exceeding the sum of $250 for an executive branch official:

From January 1 through June 30? Yes ☐ No ☒
From July 1 through December 31? Yes ☐ No ☒ NA ☐

If the answer to either question in Number 8 above is YES, complete Schedule A and attach.

9. Did you expend funds for any reception, social gathering, or other function to which more than twenty-five executive branch officials were invited during this reporting period?

Yes ☐ No ☒

If the answer to Number 9 above is YES, complete Schedule B and attach.

Missing numbered pages were blank and had no information on them

2) a. Name of Department and Individual Agency: NA

b. Total of all expenditures made January 1 through June 30: $_____

c. Total of all expenditures made July 1 through December 31: $_____
(When applicable)

d. Total of all expenditures made during the calendar year: $_____

3) a. Name of Department and Individual Agency: NA

b. Total of all expenditures made January 1 through June 30: $_____

c. Total of all expenditures made July 1 through December 31: $_____
(When applicable)

d. Total of all expenditures made during the calendar year: $_____

CERTIFICATION OF ACCURACY

I hereby certify that the information contained herein is true and correct to the best of my knowledge, information, and belief; that all reportable expenditures have been included herein; and that no information required by LSA-R.S. 49:71 et seq. has been deliberately omitted.

Signature of Lobbyist