EXECUTIVE LOBBYING REGISTRATION/ RENEWAL FOR THE YEAR OF 2008
(Fill in year.)

767
Executive Lobbyist Registration No.

FOR OFFICE USE ONLY
Postmark Date: 4/30/08

Reg-08
C/E 41687
$110.00

3071485

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 Moore (Last) Jonathan (First) ____ (MI)

2. BUSINESS PHONE (225) 339-1165 (Area Code and Phone Number)

3. FAX NUMBER (225) 336-4306

4. BUSINESS ADDRESS 564 Laurel St. (Street and No.) Baton Rouge (City) LA (State) 70801 (Zip)

MAILING ADDRESS 564 Laurel St. (Street and No.) Baton Rouge (City) LA (State) 70801 (Zip)

5. EMPLOYER Baton Rouge Area Chamber

6. EMPLOYER'S ADDRESS 564 Laurel St. (Street and No.) Baton Rouge (City) LA (State) 70801 (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 Baton Rouge Area Chamber

Address 564 Laurel St. Baton Rouge LA 70801

Business or purpose economic development

Does this person pay you? yes

If No, who pays you? ____

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