EXECUTIVE LOBBYING SUPPLEMENTAL REGISTRATION FORM

Executive Lobbyist Registration

FOR OFFICE USE ONLY
Postmark Date: 11.18.08

3072174

Instructions

- Print in ink or type.
- Complete form and return to Board of Ethics, 2415 Quail Dr., 3rd Floor, Baton Rouge LA 70808, or fax to (225) 763-8787. For information or assistance, call (225) 763-8777 or (800) 842-6630. No fee is required.
- This form must be submitted **within 5 days** of any changes in your registration form or to add employers or those you represent. It must be submitted **within 10 days** of any termination of employment or representations.

1. NAME HOOD F. MALCOLM
Last First MI

NAME CHANGE _____
Last First MI

2. BUSINESS PHONE 225.344.8036
(Area Code) Phone Number

3. FAX PHONE 225.344.8099

4. BUSINESS ADDRESS 742 N. 5TH STREET BATON ROUGE, LA 70802
Street and No. City State Zip

MAILING ADDRESS SAME ↑
Street and No. City State Zip

5. EMPLOYER F.M. HOOD & ASSOCIATES

6. EMPLOYER'S ADDRESS SAME ↑
Street and No. City State Zip

7. Have you ceased or terminated all lobbying activities requiring registration? Yes _____ No ✓

8. LIST BELOW (a) Names of persons, groups, or organizations which you are adding or eliminating; (b) the address of each such person, group, or organization listed; (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; and (e) the date of termination if applicable.

1) Name PILGRIMS PRIDE

Address P.O. BOX 93 PITTSBURG, TX 75686

Business or purpose _____

☐ New Representation
Does this person pay you? _____

If No, who pays you? _____

☑ Terminated Representation as of 11.1.08

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Executive Lobbyist Registration No.

2) Name EGAN HUB STORAGE FACILITY

Address 5400 WESTHEIMER CT, HOUSTON, TX 77056

Business or purpose

☐ New Representation
Does this person pay you?

If No, who pays you?

☑ Terminated Representation as of 11-1-08

3) Name

Address

Business or purpose

☐ New Representation
Does this person pay you?

If No, who pays you?

☐ Terminated Representation as of

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