EXECUTIVE LOBBYING REGISTRATION/ RENEWAL FOR THE YEAR OF 2008

(Fill in year.)

856

Executive Lobbyist Registration No.

FOR OFFICE USE ONLY
Postmark Date: 12/1/08
2008 REG
$110.00
CK# 4760
ack ✓
3072179

2008 Dec 1

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 Picard (Last) Jeffery (First) J. (MI)

2. BUSINESS PHONE 337-265-2044 (Area Code and Phone Number)

3. FAX NUMBER 337326-4371

4. BUSINESS ADDRESS 900 South College Rd #105 (Street and No.) Lafayette (City) LA (State) 70503 (Zip)

MAILING ADDRESS 900 South College Rd #105 (Street and No.) Lafayette (City) LA (State) 70503 (Zip)

5. EMPLOYER Merrill Lynch & Co, Inc.

6. EMPLOYER'S ADDRESS 222 Broadway (Street and No.) New York (City) NY (State) 10038 (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 Merrill Lynch & Co, Inc.

Address 222 Broadway New York, NY 10038

Business or purpose Financial Institution/Banking

Does this person pay you? Yes

If No, who pays you?

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