Lobbyist Registration Form Louisiana Board of Ethics



	Demograph	ic Information:		
Title: Mrs.	Lobbyist ID: LB00000256			
First Name: Kathy	Last Name: Car	npbell	Middle Na	ame: <u>C.</u>
ange First Name:	Change Last Name:		Change Mi	ddle Name:
Branch: Leg and Exec				
Address Information:				
Street: 6750 Excheque	er Drive, Suite B			
City: Baton Rouge		State: Louisiana		Zip Code: 70809
Email: kathycampbell@	apeleducators.or]		
Phone: 225-769-4005	Ext:			
Fax: 225-766-5053				
Employer Information:				
Employer Name: Associated	Professional Educ	ators of Louisian;	а	
Address Information:				

Street: 6750 Exchequer Drive, Suite B

809)9
809)9



Information about person, group or organization which you represent:

Representative Name : Associated P	rofessional Educators of Louisiana					
Branch: Leg and Exec						
Business Description : Educators' Organization						
Address: Street: 6750 Exchequer Drive, Suite B						
City: Baton Rouge	State: Louisiana	Zip Code: 70809				
Paid by representation: Yes Payment Category: \$50,000 - \$99,999						
If No, who pays you:						
Subject Matter 1: Educational services: colleges; technical schools; trade schools						
Subject Matter 2: Unions, labor issues, and special advocacy groups.						
Subject Matter 3:						

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Information about Business Relationships:

Person's Name : N/A

Indicated Title : n/a

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Picture:

