

Lobbyist Registration Form  
Louisiana Board of Ethics



**Demographic Information:**

Title: Mr.

Lobbyist ID: LB0000034

First Name: J.

Last Name: Pilley

Middle Name: Christopher

Change First Name: \_\_\_\_\_

Change Last Name: \_\_\_\_\_

Change Middle Name: \_\_\_\_\_

Branch: Leg and Exec

**Address Information:**

Street: 14116 Denham Road

City: Pride

State: Louisiana

Zip Code: 70770

Email: jpilley1@cox.net

Phone: 2253899429 Ext: \_\_\_\_\_

Fax: 2253870309

**Employer Information:**

Employer Name: HEALTHCARE SOLUTIONS

**Address Information:**

Street: 14116 Denham Road

City: Pride

State: Louisiana

Zip Code: 70770

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Louisiana Board of Ethics



**Information about person, group or organization which you represent:**

Representative Name : Rural Hospital Coalition

Branch: Leg and Exec

Business Description : Association representing LA's small rural hospitals

**Address:** Street: 14116 Denham Road

City: Pride

State: Louisiana

Zip Code: 70770

Paid by representation: No

Payment Category: \$24,999 or less

If **No**, who pays you:

Subject Matter 1: Health care: hospitals; nursing homes; elderly care; hospice

Subject Matter 2:

Subject Matter 3:

Representative Name : CARSA

Branch: Leg and Exec

Business Description : Trade Organization for providers of services to the disabled

**Address:** Street: 14116 Denham Road

City: Pride

State: Louisiana

Zip Code: 70770

Paid by representation: No

Payment Category: \$24,999 or less

If **No**, who pays you:

Subject Matter 1: Health care: hospitals; nursing homes; elderly care; hospice

Subject Matter 2:

Subject Matter 3:

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**Information about person, group or organization which you represent:**

Representative Name : Pecan Grove Training Center

Branch: Leg and Exec

Business Description : Training Center for Developmentally Disabled Persons

**Address:** Street: P.O. Box 12957

City: Alexandria

State: Louisiana

Zip Code: 71315

Paid by representation: No

Payment Category: \$24,999 or less

If **No**, who pays you:

Subject Matter 1: Health care: hospitals; nursing homes; elderly care; hospice

Subject Matter 2:

Subject Matter 3:

Representative Name : Brown Development LLC

Branch: Leg and Exec

Business Description : Provides Residential Care Services

**Address:** Street: Post Office Box 1029

City: Tallulah

State: Louisiana

Zip Code: 71283

Paid by representation: No

Payment Category: \$24,999 or less

If **No**, who pays you:

Subject Matter 1: Health care: hospitals; nursing homes; elderly care; hospice

Subject Matter 2:

Subject Matter 3:

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**Picture:**

