



Louisiana Board of Ethics: Lobbyist Registration Form

Registration Year: 2023

Lobbying Type(s): Legislative / Executive / Local

Demographic Information:

Lobbyist's Name: MISS CAILA MINETTE MICELI Lobbyist ID: LB005039

Name Change: _____

Address:

Street: 564 LAUREL ST

City: BATON ROUGE State: Louisiana Zip: 70801

Phone: 225-328-3909 Ext: _____

Fax: _____

Employer Information:

Employer Name: Baton Rouge Area Chamber

Employer Address:

Street: 564 Laurel St

City: Baton Rouge State: Louisiana Zip: 70801

Registration Details:

Lobbying Type: Legislative Branch Lobbying

Date of the first action which required your registration as a lobbyist: 1/01/2023

(The date in which lobbying became part of your principal duties or the date in which you acted in a representative capacity and made an expenditure on a Legislator.)

If you were a legislative lobbyist during the previous calendar year, have you completed the annual training required pursuant to R.S. 42:1170 for the previous calendar year? ☒ Yes ☐ No ☐ N/A

Lobbying Type: Executive Branch Lobbying

Date of the first action which required your registration as a lobbyist: 1/01/2023

(The date in which you acted in a representative capacity and made an expenditure on an executive branch official.)

If you were an executive lobbyist during the previous calendar year, have you completed the annual training required pursuant to R.S. 42:1170 for the previous calendar year? ☒ Yes ☐ No ☐ N/A

Lobbying Type: Local Government Lobbying

Date of the first action which required your registration as a lobbyist: 1/01/2023

(The date in which you, acted in a representative capacity, made an aggregate amount of expenditures of \$500 or more, on local level officials.)



Louisiana Board of Ethics: Lobbyist Registration Form

Registration Year: 2023

Lobbying Type(s): Legislative / Executive / Local

Information about persons, groups, or organizations represented:

Representative Name:

Description:

Street: _____

City: _____ State: _____ Zip: _____

Branch: _____ Employment Start Date: _____ Lobbying Start Date: _____

Paid by Representation: _____ Payment Category: _____ End Date: _____

If No, who pays you:

Subject Matters:

Information about Business Relationships

Person's Name: N/A

Indicated Title: n/a