

Lobbyist Registration Form
Louisiana Board of Ethics



Demographic Information:

Title: n/a

Lobbyist ID: LB00000545

First Name: Alvin Last Name: Reine Middle Name: _____

Change First Name: _____ Change Last Name: _____ Change Middle Name: _____

Branch: Exec

Address Information:

Street: 9684 Norris Ferry Road

City: Shreveport

State: Louisiana

Zip Code: 71106

Email: alvin.reine@tpna.com

Phone: 318-797-3302 Ext: _____

Fax: 318-797-3308

Employer Information:

Employer Name: Takeda Pharmaceuticals America

Address Information:

Street: One Takeda Parkway

City: Deerfield

State: Illinois

Zip Code: 60015

Lobbyist Registration Form
Louisiana Board of Ethics



Information about person, group or organization which you represent:

Representative Name : Takeda Pharmaceuticals America

Branch: Exec

Business Description : Pharmaceutical manufacturer

Address: Street: One Takeda Parkway

City: Deerfield

State: Illinois

Zip Code: 60015

Paid by representation: Yes

Payment Category: \$24,999 or less

If **No**, who pays you:

Subject Matter 1: Health care: pharmaceutical and medical devices; research; development; sales

Subject Matter 2:

Subject Matter 3:

Lobbyist Registration Form
Louisiana Board of Ethics



Picture:

