

Clerk of the House of Representatives
Legislative Resource Center
B-106 Cannon Building
Washington, DC 20515

Secretary of the Senate
Office of Public Records
232 Hart Building
Washington, DC 20510

LOBBYING REPORT

Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required to Complete This Page

1. Registrant name Patricia Lynch Associates			
2. Address <input type="checkbox"/> Check if different than previously reported 111 Washington Avenue, Suite 606 Albany NV 12210 US			
3. Principal place of business (if different than line 2) City State/Zip or Country			
4a. Contact Name Ms. Lynch	b. Telephone number 518/432-9220	c. E-mail plloby@aol.com	5. Senate ID # 7661625
7. Client Name <input type="checkbox"/> Self RADIANT ENERGY CORP	6. House ID # 361120		

TYPE OF REPORT 8. Year 2005 Midyear (January 1-June 30) OR Year End (July 1-December 31)

9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report ⇨ Termination Date _____ 11. No Lobbying Act

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 <input checked="" type="checkbox"/> \$10,000 or more <input type="checkbox"/> ⇨ \$ _____	EXPENSES relating to lobbying activities for this reporting period were: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input type="checkbox"/> ⇨ \$ _____
Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).	14. REPORTING METHOD. Check box to indicate exp accounting method. See instructions for description of opt <input type="checkbox"/> Method A. Reporting amounts using LDA definitions <input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(3) Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) of Internal Revenue Code

Edit Form > File w
Senate Password _____ File w

Signature Patricia Lynch

Date 2/13/2006

Digitally signed by Patricia Lynch
DN: CN = Patricia Lynch, C = US, O = DST ACES Business Representatives, OU = ACES
TrustID Business Certificate
Reason: I am approving this document
Date: 2006.02.13 14:43:33 -0500

1000081507

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Printed Name and Title PATRICIA LYNCH

LD-2DS (Rev. 4.06)

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