

Staff 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

SECRETARY OF THE SENATE

05 FEB 15 AM 11:02

**LOBBYING REPORT**

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

1. Registrant Name Akin Gump Strauss Hauer & Feld LLP			
2. Address <input type="checkbox"/> Check if different than previously reported 1333 New Hampshire Avenue, NW			
3. Principal Place of Business (if different from line 2) City: Washington State/Zip (or Country) DC 20036			
4. Contact Name	Telephone	E-mail (optional)	5. Senate ID
Donald R. Pongrace	202-887-4000		682-31
7. Client Name <input type="checkbox"/> Self			6. House ID
Seneca Niagara Falls Gaming Corporation			31784

**TYPE OF REPORT** 8. Year 2004 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 01/01/05 11. No Lobbying Activities

**INCOME OR EXPENSES – Complete Either Line 12 OR Line 13**

12. Lobbying Firms	13. Organizations
<b>INCOME</b> relating to lobbying activities for this reporting period was: Less than \$10,000 <input checked="" type="checkbox"/> \$10,000 or more <input type="checkbox"/> ⇨ \$ _____ <small>Income (nearest \$20,000)</small>	<b>EXPENSES</b> relating to lobbying activities for this reporting period were: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input type="checkbox"/> ⇨ \$ _____ <small>Expenses (nearest \$20,000)</small>
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).	<b>14. REPORTING METHOD.</b> Check box to indicate reporting method. See instructions for description of methods. <input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definitions <input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 60 Internal Revenue Code <input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 16 Internal Revenue Code

Signature \_\_\_\_\_ Date February 14, 2005

Printed Name and Title Donald R. Pongrace, Partner

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LD-2 (REV. 6/98)

P.

Grant Name Akin Gump Strauss Hauer & Feld LLP Client Name Seneca Niagara Falls Gaming Corpora

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the engaged in lobbying on behalf of the client during the reporting period. **Using a separate page for each co** information as requested. Attach additional page(s) as needed.

15. General issue area code GAM (one per page)

16. Specific lobbying issues

General representation regarding Indian Gaming Regulatory Act and Indian gaming

17. House(s) of Congress and Federal Agencies contacted  Check if None

18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)
Todd J. Araujo	
Allison C. Binney	
Barry W. Brandon	
Katherine D. Brodie	
Anthony Foti	
Ado A. Machida	
Donald R. Pongrace	

19. Interest of each foreign entity in the specific issues listed on line 16 above  Check if None

Signature \_\_\_\_\_ Date February 14, 20



Registrant Name Akin Gump Strauss Hauer & Feld LLP Client Name Seneca Niagara Falls Gaming Corporat

**Information Update Page – Complete ONLY where registration information has changed.**

20. Client new address

21. Client new principal place of business (if different from line 20)

City:

State/Zip (or Country)

22. New general description of client's business or activities

**LOBBYIST UPDATE**

23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client

Barry W. Brandon

**ISSUE UPDATE**

24. General lobbying issues previously reported that **no longer** pertain

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organizations(s)

Name	Address	Principal Place of (city and state or

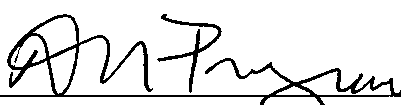
26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client

**FOREIGN ENTITIES**

27. Add the following foreign entities

Name	Address	Principal place of business (city and state or country)	Amount of contribution if more than \$10,000

28. Name of each previously reported foreign entity that no longer owns, or controls, or is affiliated with the registrant, affiliated organization.

Signature  Date February 14, 20

