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## LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration

1. Effective Date of Registration 6/28/2002

2. House Identification Number 33563-

Senate Identification Number 15042-

### REGISTRANT

3. Registrant name Foley & Lardner

Address 3000 K Street, N.W., Suite 500

City Washington, D.C.

State

Zip 20007

4. Principal place of business (if different from line 3)

City

State/Zip (or Country)

5. Telephone number and contact name

(202) 945-6023

Contact Madelynn M. Lane

E-mail (optional) mlane@f

6. General description of registrant's business or activities

Law Firm

**CLIENT** *A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should check labeled "Self" and proceed to line 10.*  Self

7. Client name Keeton Corrections, Inc.

Address 401 West 14th Street

City Lynn Haven

State FL

Zip 32444

8. Principal place of business (if different from line 7)

City

State/Zip (or Country)

9. General description of client's business or activities

State and Federal Halfway Housing and Rehabilitation Programs

### LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
<u>Kate Leonard</u>	

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Registrant Name Foley & Lardner Client Name Keeton Corrections, Inc.

**LOBBYING ISSUES**

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1.

LAW

12. Specific lobbying issues (current and anticipated)

Bureau of prisons' funding for halfway houses and drug re-hab programs.

**AFFILIATED ORGANIZATIONS**

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant during a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying activities?

No ⇒ Go to line 14.

Yes ↓ Complete the rest of this section for each entity matching the criteria above, then proceed to line 14.

Name	Address	Principal Place of Business (city and state or country)

**FOREIGN ENTITIES**

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; **OR**
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or supervises the lobbying activities of the client or any organization identified on line 13; **OR**
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the lobbying activity?

No ⇒ Sign and date the registration.

Yes ↓ Complete the rest of this section for each entity matching the criteria above, then sign and date the registration.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities

Signature Cleta Mitchell Date 8-12-02

Printed Name and Title Cleta Mitchell, Attorney

