

02 MAY 14 PM 1:32

Lobbying Disclosure Act of 1995 (Section 4)

1. Effective Date of Registration May

2. House Identification Number _____ Senate Identification Number _____

3. Registrant name Jack L. Williams

Address 108 Duquesne Ct.

City Little Rock

State Ar

Zip 7222

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

City

State/Zip (or Country)

5. Telephone number and contact name

(50) 868-9320

Contact Jack Williams E-mail (optional) _____

6. General description of registrant's business or activities

ACR + FOO

CLIENT

A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should

labeled "Self" and proceed to line 10.

Self

7. Client name Tyson Foods, Inc.

Address

P.O. Box 2020

City

Springdale

State *Ark.*

Zip 72701

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

City

State/Zip (or Country)

9. General description of client's business or activities

al description of client's business or activities *General Agriculture*
AGR & FOO - Food Related Issues

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 a person has served as a "covered executive branch official" or "covered legislative branch official" without 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 any)
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.....

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Registrant Name _____

Client Name _____

LOBBYING ISSUES

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

AGR F00

12. Specific lobbying issues (current and anticipated)

General Agriculture and Food Issue**AFFILIATED ORGANIZATIONS**

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

☒ No ⇒ Go to line 14.☐ Yes ↓ Complete the rest of this section for each entity meeting the criteria above, then proceed to line 14.

Name	Address	Principal Place of (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;
 b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances 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 Jack L WilliamsDate May 13,

Printed Name and Title JOHN R. WILLIAMS

Form LD-1 (Rev. 06/98)