

FROM

(THU) 7. 7' 05 11:30/ST. 11:29/NO. 486231'

**Preston|Gates|Ellis &
Rouvelas|Meeds LLP**

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05 JUL -7 PM 1:23

July 7, 2005

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

Secretary of the Senate
Office of Public Records
232 Hart Building
Washington, D.C. 20510

RE: LDA Registration Form

Dear Clerk of the House of Representatives and Secretary of the Senate,

I am hereby enclosing a lobbying registration form for the representation of HWA, I by Preston Gates Ellis & Rouvelas Meeds LLP. This form is being filed late due to a clerical oversight.

If you have any questions about this matter, please do not hesitate to contact me directly at (202) 661-6220

Sincerely,

PRESTON GATES ELLIS
& ROUVELAS MEEDS LLP

By 
Darrell L. Conner

Enclosures

1735 NEW YORK AVENUE NW, SUITE 500 WASHINGTON, DC 20006-5209 TEL: (202) 628-1700 FAX: (202) 331-1024 wv
Anchorage Coeur d'Alene Hong Kong Orange County Portland San Francisco Seattle Spokane Washington

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|---|--|
| 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 |
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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

1. Effective Date of Registration Jan 1, 20
 2. House Identification Number _____ Senate Identification Number 32098-41

REGISTRANT

3. Registrant name *Organization* Preston Gates Ellis & Rouvelas Meeds LLP
 Address 1735 New York Ave NW #500
 City Washington State DC Zip 20006 U
 4. Principal place of business (if different than line 3)
 City _____ State _____ Zip _____
 5. Telephone number and contact name
202-628-1700 Prefix _____ Full Name Terri Pauk
 Contact Ms. E-mail terrip@prestongates.com
 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 the labeled "Self" and proceed to line 10.* Self

7. Client name HWA, Inc.
 Address 1809 - 7th Avenue, Suite 1400
 City Seattle State WA Zip 98101 U
 8. Principal place of business (if different than line 7)
 City _____ State _____ Zip _____
 9. General description of client's business or activities
Provides Level 4 armed and unarmed security guard and monitoring services to key federal installations.

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 first becoming a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

| First | Name Last | Suffix | Covered Official Position (if applicable) |
|---------|-----------|--------|---|
| Darrell | Conner | | |
| Roger | Morse | | |
| Rick | Valentine | | |
| | | | |
| | | | |
| | | | |

FROM

Registrant Name Preston Gates Ellis & Rouvelas Meeds LLF

Client Name HWA, Inc.

LOBBYING ISSUES

Find the code to select below.

Go to page 3 to add more lobb

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

BUD HOM

12. Specific lobbying issues (current and anticipated)

Funding of existing contract with US ACE for security services in Kansas City District.

AFFILIATED ORGANIZATIONS

Go to page 3 to add more org

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in 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 matchin criteria above, then proceed to line 14.

| Name | Address | Principal place of Busine (city and state or count |
|------|---------|---|
| | | |

FOREIGN ENTITIES

Go to page 3 to add more forei

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 subsidizes ac 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 outcome o lobbying activity?

No => Sign and date the registration.

Yes => Complete the rest of this section for each entit matching the criteria above, then sign and date registration.

| Name | Address | | | Principal place of business (city and state or country) | Amount of contribution for lobbying activities | C P |
|------|------------------------|----------------|---------|--|--|--------|
| | Street Address City | State/Province | Country | | | |
| | | | | | | |

Form Com

Printed Name and Title Darrell Conner, Government Affairs Counselor

1735 NEW YORK AVENUE NW SUITE 500 WASHINGTON, DC 20006 TEL: (202) 628-1700 FAX: (202) 331-1024 www.pra
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