

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

SECRETARY OF THE SENATE
07 AUG 22 AM 11:00
LOBBYING REPO

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

1. Registrant Name <input type="checkbox"/> Organization <input checked="" type="checkbox"/> Individual			
Prefix <u>Mr.</u> First <u>JAMES</u> Last <u>SANTINI</u>			
2. Address <input type="checkbox"/> Check if different than previously reported			
Address1 <u>1101 KING STREET, #350</u> Address2 _____			
City <u>ALEXANDRIA</u> State <u>VA</u> Zip Code <u>22314</u> - _____ Cour _____			
3. Principal place of business (if different than line 2)			
City _____ State _____ Zip Code _____ - _____ Cour _____			
4a. Contact Name <u>Mrs. VI MORAN</u>	b. Telephone Number <input type="checkbox"/> International Number <u>(703) 684-0755</u>	c. E-mail <u>vipmoran@aol.com</u>	5. Sen <u>3434</u>
7. Client Name <input type="checkbox"/> Self <u>National Tour Association</u>	6. Hou <u>3288</u>		

TYPE OF REPORT 8. Year 2007 Midyear (January 1-June 30) Year End (July 1-Dec)

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 Activ _____

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying	13. Organizations
INCOME relating to lobbying activities for this reporting period was:	EXPENSE relating to lobbying activities for this reporting period were:
<u>Less than \$10,000</u> <input type="checkbox"/>	<u>Less than \$10,000</u> <input type="checkbox"/>
<u>\$10,000 or more</u> <input checked="" type="checkbox"/> \$ <u>20,000.00</u>	<u>\$10,000 or more</u> <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 Check box to indicate accounting method. See instructions for descriptive
	<input type="checkbox"/> Method A. Reporting amounts using LDA definition
	<input type="checkbox"/> Method B. Reporting amounts under section 6033 of Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under section 162(e) of Internal Revenue Code

Signature Digitally Signed By: Vilailack P Moran *Vilailack P Moran* Date 08/1
US, DST Aces Unaffiliated Individual, Vilailack P Moran

0000083322

Printed Name and Title Vilailack Moran, Office Manager

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Printed Name and Title **Vitailack Moran, Office Manager**

Vitailack Moran

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