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LOBBYING REPORT

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

1. Registrant name			
Prefix	Ms.	First	Joann
		Last	Payne
2. Address <input type="checkbox"/> Check if different than previously reported			
1776 Massachusetts Ave., NW Suite 500			
City	Washington, DC	State	DC
		Zip Code	20036
			Country USA
3. Principal place of business (if different than line 2)			
City		State	
		Zip Code	
		Country	
4a. Contact Name		b. Telephone number	c. E-mail
Prefix	Full Name		
Ms.	Joann Payne	202-452-9119	BPayne9517@aol.com
7. Client Name <input type="checkbox"/> Self			5. Senate ID #
Bayview Citizens for Social Justice			30941-36
			6. House ID #
			33238001

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 _____ 11. No Lobbying Activity

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms

INCOME relating to lobbying activities for this reporting period was:

Less than \$10,000
 \$10,000 or more ⇔ \$ -0-

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).

13. Organizations

EXPENSES relating to lobbying activities for this reporting period were:

Less than \$10,000
 \$10,000 or more ⇔ \$ _____

14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.

Method A. Reporting amounts using LDA definitions only
 Method B. Reporting amounts under section 6033(b)(8) of Internal Revenue Code
 Method C. Reporting amounts under section 162(e) of the Internal Revenue Code

Form Comp

Printed Name and Title Joann Payne, President

1.1

202 432 1040

Joann Payne

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Printed Name and Title Joann Payne, President

Joann Payne

111-208 (REV. 4/03)

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Registrant Name Joann Payne Client Name Bayview Citizens for Social Justice

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

15. General issue area code HOU - Housing (one per page)

16. Specific lobbying issues

EDI Grant for Community Center

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

Senate and House members of Congress

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

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
Joann	Payne		

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

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202-452-1540

Joann Payne

05 05:32p

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2

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4

Registrant Name Joann Payne

Client Name Bayview Citizens for Social Justice

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address

Address

City

State

Zip Code

Country

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

City

State

Zip Code

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

First Name

Last Name

Suffix

First Name

Last Name

Suffix

1

3

2

4

ISSUE UPDATE

Find the code to select below.

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

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal place of Business (city and state or country)
	Address	City
	C/S/Z	State
	Address	City
	C/S/Z	State
		Country

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

1

2

3

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Street Address	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Ownership percentage client
	City	State/Province	Country		
			City		
			State		
			Country		

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

1

3

5

2

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Printed Name and Title Joann Payne, President

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202-452-1340

Joann Payne

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