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# LOBBYING REGISTRATION

## Lobbying Disclosure Act of 1995 (Section 4)

**Check One:**  New Registrant  New Client for Existing Registrant  Amendment

1. Effective Date of Registration 05/21

2. House Identification 30174

Senate Identification 70175

### REGISTRANT Organization Individual

3. Registrant Organization FLEISHMAN-HILLARD GOVERNMENT RELATIONS

Address 1775 EYE STREET NW

Address2 SUITE 700

City WASHINGTON

State DC

Zip 20006

Count

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

City

State

Zip

Count

5. Contact name and telephone number

International Number

Contact Mr. Max Sandlin

Telephone (202) 551-1440

E-mail greg.stanford@fleishman.com

6. General description of registrant's business or activities

Government Relations

### 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 NAU Country

Address 7333 Sunwood Drive

City Ramsey

State MN

Zip 55303

Count

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

City

State

Zip

Count

9. General description of client's business or activities

Crop insurance

### 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)
First	Last	Suffix	
Bill	Luther		
Max	Sandlin		



### LOBBYING ISSUES

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

AGR INS

12. Specific lobbying issues (current and anticipated)

Farm Bill

### AFFILIATED ORGANIZATIONS

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 Busin
Street City	State/Province Zip Code Country	City State Country
		City State Country
		City State Country
		City State Country

### FOREIGN ENTITIES

14. Is there any foreign entity

- 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 activ 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 of t lobbying activity?

No --> Sign and date the registration.

Yes --> Complete the rest of this section for each entity matchir the criteria above, then sign the registration.

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

Signature

Date

6/2

Printed Name and Title Max Sandlin, Co-Chairman

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