

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

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## LOBBYING REPORT

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

|  |           |  |                |
|--|-----------|--|----------------|
| 1. Registrant Name<br><i>Akalde &amp; Fay</i>  |           |  |                |
| 2. Address <input type="checkbox"/> Check if different than previously reported<br><i>2111 Wilson Blvd Suite 850</i> |           |  |                |
| 3. Principal Place of Business (if different from line 2)<br>City: <i>Arlington</i>                                  |           | State/Zip (or Country) <i>VA 22201</i> |                |
| 4. Contact Name  | Telephone | E-mail (optional)                      | 5. Senate ID # |
| 7. Client Name <input type="checkbox"/> Self<br><i>County Blake</i>  |           |  | 6. House ID #  |

TYPE OF REPORT 8. Year 2010 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   |   |
|---|---|
| <b>12. Lobbying Firms</b><br>INCOME relating to lobbying activities for this reporting period was:<br>Less than \$10,000 <input type="checkbox"/><br>\$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ <u>20,000</u><br>Income (nearest \$20,000)<br>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). | <b>13. Organizations</b><br>EXPENSES relating to lobbying activities for this reporting period were:<br>Less than \$10,000 <input type="checkbox"/><br>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____<br>Expenses (nearest \$20,000)<br><b>14. REPORTING METHOD.</b> Check box to indicate expense accounting method. See instructions for description of options.<br><input type="checkbox"/> Method A. Reporting amounts using LDA definitions only<br><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code<br><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code |

Signature

Printed Name and Title

*Paul Schlegel - Partner*

LD-2 (REV. 6/98)

PAGE 1 of \_\_\_\_\_

Registrant Name \_\_\_\_\_ Client Name \_\_\_\_\_

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the registrant 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 RES (one per page)

16. Specific lobbying issues  
Land Conversion

17. House(s) of Congress and Federal agencies contacted  Check if None  
Bureau of Land Management  
Senate  
House of Representatives

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

| Name                     | Covered Official Position (if applicable) | New                                 |
|--------------------------|---|-------------------------------------|
| <u>Paul Schlessinger</u> |   | <input checked="" type="checkbox"/> |
| <u>Tim Stroud</u>        |   | <input checked="" type="checkbox"/> |
|                          |   | <input type="checkbox"/>            |
|                          |   | <input type="checkbox"/>            |
|                          |   | <input type="checkbox"/>            |
|                          |   | <input type="checkbox"/>            |
|                          |   | <input type="checkbox"/>            |
|                          |   | <input type="checkbox"/>            |

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

Signature Paul Schlessinger Date \_\_\_\_\_  
Printed Name and Title Paul Schlessinger Partner

Page \_\_\_\_\_ of \_\_\_\_\_