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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

SECRETARY OF THE SENATE

LOBBISHIG REPORT

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

1. Registrant name			
Liz Robbins Associates			
2. Address Check if different than previously reported			
441 New Jersey Ave. SE			
Washington D	c	20003	USA
3. Principal place of business (if different than line 2)	,		
	ip or Country	***************************************	
4a. Contact Name b. Telephone number	c. E-mail		5. Senate ID#
Ms. Liz Robbins (202) 544-6093 liz@ 7. Client Name Self	lizrobbins.com		33432-87
Fischer International Affairs Systems Corp			6. House ID # 32204017
	y 1-June30) 🔀	OR Year	
9. Check if this filing amends a previously filed version of this report 10. Check if this is a Termination Report ☐ Termination Date INCOME OR EXPENSES. Complete File Vision 1.			11. No Lobbying Activ
INCOME OR EXPENSES - Complete Either Line 1 12. Lobbying Firms	2 OR Line 13	13. Organi	zations
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating were:	g to lobbying act	ivities for this reporting
Less than \$10,000	Less than \$10,000		
\$10,000 or more 🗵	\$10,000 or more	□ ⇒ \$_	
Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all	14. REPORTING METHOD. Check box to indicate exper accounting method. See instructions for description of option		
payments to the registrant by any other entity for lobbying activities on behalf of the client).	Method B.		s using LDA definitions only s under section 6033(b)(8) o
	Method C.	-	s under section 162(e) of the
Signature	Date	08/10	Edit >

	16. Specific lobbying issues				
Intellec	tual Property Protection				
17. House(s) of Congress and Federal ager	ncies contacted Check if None			
House,	Senate				
18. Name o	of each individual who acted as	a lobbyist in this issue area			
	Name	Covered Official Position (if applicable)			
Liz	Robbins	Principal/Owner			
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	of each foreign entity in the spe	ecific issues listed on line 16 above Check if None			
19. Interest	ar and rate. Br. anno, in the ppe				
19. Interest	or one is a second of the seco				

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the tengaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code

Client Name Fischer International Affairs Systems

Registrant Name __Liz Robbins Associates

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16. Specific	c lobbying issues	
Intellect	ual Property Protection	
17. House(s	s) of Congress and Federal agen	cies contacted Check if None
House,	Senate	
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i 8. iname o	f each individual who acted as Name	a lobbyist in this issue area Covered Official Position (if applicable
Liz	Robbins	Principal/Owner
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19. Interest	of each foreign entity in the spe	ecific issues listed on line 16 above Check if None
19. Interest	of each foreign entity in the spe	ecific issues listed on line 16 above 🔀 Check if None
9. Interest	of each foreign entity in the spe	ecific issues listed on line 16 above 🔀 Check if None

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the i engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code

Client Name __ Fischer International Affairs Systems

Registrant Name Liz Robbins Associates

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17. House(s House, S) of Congress and Federal agen	cies contactedCheck if None
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18. Name of	feach individual who acted as a	a lobbyist in this issue area
	Name	Covered Official Position (if applicable
Liz	Robbins	Principal/Owner

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9. Interest o	of each foreign entity in the sne	ecific issues listed on line 16 above Check if None
		Check if Notice

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the 1 engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code

Client Name Fischer International Affairs Systems

(one per page)

Registrant Name ___Liz Robbins Associates

information as requested. Attach additional page(s) as needed.

15. General issue area code HCR - Health Issues

(3)