

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

RECEIVED
 SECRETARY OF THE SENATE
 99 AUG 12 PM 2:07
 HAND DELIVERED

LOBBYING REPORT

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

| | | | |
|--|--|-----------------------------------|-------------------|
| 1. Registrant Name <i>ICG CONSULTING, L.L.C.</i> | | | |
| 2. Address <input type="checkbox"/> Check if different than previously reported <i>P.O. Box 42</i> | | | |
| 3. Principal Place of Business (if different from line 2) City: <i>RECTOR TOWN</i> State/Zip (or Country) <i>VIRGINIA 20140</i> | | | |
| 4. Contact Name <i>NICHOLAS HAYES</i> | | Telephone <i>540-364-4500</i> | E-mail (optional) |
| 7. Client Name <input type="checkbox"/> Self <i>GREAT WESTERN CELLULAR PARTNERSHIP</i> | | 5. Senate ID # <i>19068-51</i> | |
| | | 6. House ID # <i>35064 004</i> | |

TYPE OF REPORT 8. Year 1999 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

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

Signature *Nicholas Hayes*

Printed Name and Title *NICHOLAS HAYES, PRES*

Registrant Name ICG CONSULTING LLC Client Name GREAT WESTERN CELLULAR PARTNERSHIP

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 TEC (one per page)

16. Specific lobbying issues HR 1817

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

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

| Name | Covered Official Position (if applicable) | New |
|-----------------------|---|--------------------------|
| <u>NICHOLAS HAYES</u> | | <input type="checkbox"/> |
| | | <input type="checkbox"/> |
| | | <input 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 _____ Date 8/5/99
Printed Name and Title NICHOLAS HAYES, PRES.