

SECRETARY
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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 |
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LOBBYING REPORT

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

| | | | |
|---|------------|-----------------------------|---------------------|
| 1. Registrant name | | | |
| Organization | | Smith, Hinaman & Associates | |
| 2. Address <input type="checkbox"/> Check if different than previously reported | | | |
| Address1 311 N. Washington St | | | |
| City | Alexandria | State | VA |
| Zip Code | 22314 | Country | US |
| 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 | | |
| Mr. | Don Smith | 703-684-9188 | shads13@comcast.net |
| 7. Client Name <input type="checkbox"/> Self | | | 5. Senate ID # |
| Dredging Contractors of America | | | 6. House ID # |
| | | | 3527800 |

TYPE OF REPORT 8. Year 2006 Midyear (January 1-June 30) ☒ OR Year End (July 1-December)

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 Acti

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

| | |
|--|--|
| <p align="center">12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ <u>40,000</u></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 align="center">13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____</p> <p>14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitions of</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of Internal Revenue Code</p> |
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Form 6

Printed Name and Title Julie Hunt Treasurer

3000202086



Printed Name and Title Julie Hunt Treasurer

LD-2DS (Rev. 4.07)

Page 2

Registrant Name Smith, Hinaman & Associates

Client Name Dredging Contractors of America

ADDENDUM for General Lobbying Issue Area BUD

16. Specific lobbying issues (continued from previous page)

Appropriation issues in the Energy and Water Development subcommittees regarding dredgers owned and operated by the government and the ready reserve program

0000202088

Registrant Name Smith, Hinaman & AssociatesClient Name Dredging Contractors of America**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 UPDATE23. 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

S

1

3

2

4

ISSUE UPDATE24. General lobbying issues that **no longer** pertain

Find the code to select below.

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 Country |
| | Address | City |
| | C/S/Z | State |

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

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

1

3

5

2

4

6

Add a page for more

Printed Name and Title Julie Hunt Treasurer

