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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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SECRETARY OF THE SENATE
05 FEB 16 PM

LOBBYING REPORT

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

| | | | |
|---|----------------------|----------------------------|---------------------|
| 1. Registrant name | | | |
| Organization | | Sparber & Associates, Inc. | |
| 2. Address <input type="checkbox"/> Check if different than previously reported | | | |
| Address1 1319 F Street NW | | Suite 301 | |
| City Washington | State DC | Zip Code 20004 | Country USA |
| 3. Principal place of business (if different than line 2) | | | |
| City | State | Zip Code | Country |
| City | State/Zip or Country | | |
| 4a. Contact Name Prefix Full Name | | b. Telephone number | c. E-mail |
| Ms. Carole Milazzo | | 202-393-3240 | carolem@sparber.com |
| 7. Client Name <input type="checkbox"/> Self | | | 5. Senate ID # |
| Methyl Bromide Working Group | | | 36275-51 |
| | | | 6. House ID # |
| | | | 31337003 |

TYPE OF REPORT 8. Year 2004 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 September 15, 200411. No Lobbying Activity ☐**INCOME OR EXPENSES - Complete Either Line 12 OR Line 13**

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

Form CoPrinted Name and Title Karen F. Suhr, Senior Vice President*Karen F. Suhr*

Registrant Name Sparber & Associates, Inc.Client Name Methyl Bromide Working Group**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

Sul

1

3

2

4

ISSUE UPDATE

Find the code to select below.

24. General lobbying issues that **no longer** pertain**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 | Address | Principal place of business (city and state or country) | Amount of contribution for lobbying activities | Owr perc clier |
|------|----------------|------------------------|--|---|----------------------|
| | City | State/Province Country | 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 i

