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**LOBBYING REGISTRATION**

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration 1. Effective Date of Registration 7/1/2002

2. House Identification Number \_\_\_\_\_

Senate Identification Number \_\_\_\_\_

**REGISTRANT**3. Registrant name DCI Group, LLCAddress 1133 21st Street NW, Suite M100City WashingtonState DCZip 20036

4. Principal place of business (if different from line 3)

City \_\_\_\_\_

State/Zip (or Country) \_\_\_\_\_

5. Telephone number and contact name

Contact Jami BausterE-mail (optional) jbauster

6. General description of registrant's business or activities

Lobbying & Public Policy Management

**CLIENT** *A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should ch*  
*labeled "Self" and proceed to line 10.*  *Self*

7. Client name VISA USAAddress 1300 Connecticut Ave., Suite 900City WashingtonState DCZip 20036

8. Principal place of business (if different from line 7)

City \_\_\_\_\_

State/Zip (or Country) \_\_\_\_\_

9. General description of client's business or activities

Banking Issues**LOBBYISTS**

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any p  
 this section has served as a "covered executive branch official" or "covered legislative branch official" within tw  
 acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applic
<u>Tony Feather</u>	<u>N/A</u>
<u>Douglas Davenport</u>	<u>N/A</u>
<u>Teddy Eynon</u>	<u>N/A</u>



Registrant Name DCI Group, LLC Client Name VISA USA

**LOBBYING ISSUES**

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1

BAN

12. Specific lobbying issues (current and anticipated)

Banking Issues

**AFFILIATED ORGANIZATIONS**

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying :

No ⇨ Go to line 14.

Yes ↓ Complete the rest of this section for each entity the criteria above, then proceed to line 14.

Name	Address	Principal Place of Bus (city and state or cou

**FOREIGN ENTITIES**


14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; **OR**
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or activities of the client or any organization identified on line 13; **OR**
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in t of the lobbying activity?

No ⇨ Sign and date the registration.

Yes ↓ Complete the rest of this section for e: matching the criteria above, then sign registration.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities

Signature  Date 02/14/200

Printed Name and Title Timothy Hyde, Managing Partner

Form LD-1 (Rev. 06/98)