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 OD MAR 29 AM 9: 56 H. D.

## LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration	Effective Date of Registration3/24/00
2. House Identification Number	Senate Identification Number
REGISTRANT 3. Registrant name John Lundy & Associat	res
Address 633 North State Stree	
City Jackson	State MS Zip 39202
Principal place of business (if different from line 3 City	
5. Telephone number and contact name (601) 949-4712 Cont	act John Lundy E-mail (optional)
6. General description of registrant's business or active Lobby ist	vities
7 Client name	Sely CLCA
City Houston	Stoin 7in
<ol> <li>Principal place of busidess (if different from line 7 City</li> </ol>	
<ol> <li>General description of client's business or activitie</li> <li>Develop electric generation plants</li> </ol>	:5
"This section has served as a "covered executive by	ted to act as a lobbyist for the client identified on line 7. If any person listed in ranch official" or "covered legislative branch official" within two years of first ive and/or legislative position(s) in which the person served.
• Рипс	Covered Official Position (if applicable)
John Lundy	Former Chief of Staff to Semator Trent Lott (R-MS)
Form I.D-1 (Rev. 06/98)	Page

LOBBYING ISSU  1. General lobbying issue		icable codes listed in instructions and	on the reverse side of Form I.	D-1, page 1.	
UTI					
2. Specific lobbying issue	s (current and anticipa	······································		<u> </u>	
General issues r	elated to build	ling of electric generatio	n plants in Mississi	ppi.	
FFILIATED ORG Is there an entity other a semiannual period at	than the client that	contributes more than \$10,000 to tagor part plans, supervises or contr	the lobbying activities of the	ne registrant in	
<b>②</b> No⇔ Go to lir	ne 14.	☐ Yes 1 Complete the rest of the criteria above,	of this section for each enti then proceed to line 14.	ty matching	
Name		Address	Principal Place of B	Principal Place of Business (city and state or country)	
-					
•					
OREIGN ENTITI  . Is there any foreign en  a) holds at least	Lity that:	ership in the client or any organiza	ation identified on line 13:	or	
<ul> <li>b) directly or in activities of</li> </ul>	directly, in whole or the client or any org	r in major part, plans, supervises, c anization identified on line 13; Of organization identified on line 13	controls, directs, finances o	r subsidizes	
of the tobbyi	ng activity?	Control of the contro	day sing a survey interest in	inc odicome	
	No⇔ Sign and date the registration.		Yes   Complete the rest of this section for each entity matching the criteria above, then sign and date the registration.		
☑ No⇔ Sign and da		matching th	a.	ach entity and date the	
No⇔ Sign and da Name	Address	matching the registration	Amount of contribution for	Ownership percentage in client	
	***	matching the registration principal place of business	Amount of contribution for	Ownership percentage	
	***	matching the registration principal place of business	Amount of contribution for	Ownership percentage	
	***	matching the registration of the registration	Amount of contribution for	Ownership percentage	