

U.S. 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  
07 APR 26 P.

# LOBBYING REGISTRATION

## Lobbying Disclosure Act of 1995 (Section 4)

**Check One:** ☒ New Registrant ☐ New Client for Existing Registrant ☐ Amendment

1. Effective Date of Registration 04

### 2. House Identification

### Senate Identification

### REGISTRANT

☐ Organization ☒ Individual

3. Registrant Prefix Ms. First Ellen C. Last Williams

Address 519 Murray Street Address2

City Frankfort State KY Zip 40342 - Co

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

City State Zip - Co

### 5. Contact name and telephone number

☐ International Number

Contact Ms. Ellen Williams Telephone (502) 227-1065 E-mail ECWilliams@aol.com

### 6. General description of registrant's business or activities

### Government Relations

### CLIENT

A Lobbying Firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should be labeled "Self" and proceed to line 10. ☐ Self

7. Client name Eastern Kentucky University

Address 521 Lancaster Avenue

City Richmond State KY Zip 40475 - 3102 Co

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

City State Zip - Co

### 9. General description of client's business or activities

Institution of higher learning, 4-year state university

### 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 person in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of the date of registration as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

| Name  |          |        | Covered Official Position (if applicable) |
|-------|----------|--------|-------------------------------------------|
| First | Last     | Suffix |                                           |
| Ellen | Williams |        |                                           |
|       |          |        |                                           |
|       |          |        |                                           |
|       |          |        |                                           |

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**LOBBYING ISSUES**

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

BUD

EDU

12. Specific lobbying issues (current and anticipated)

Funding opportunities for the University

**AFFILIATED ORGANIZATIONS**

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

☒ No --> Go to line 14.

☐ Yes --> Complete the rest of this section for each entity matching the criteria above, then proceed to line 14.

| Name | Address        |                |          | Principal Place of Business |
|------|----------------|----------------|----------|-----------------------------|
|      | Street<br>City | State/Province | Zip Code | Country                     |
|      |                |                |          | City<br>State<br>Country    |
|      |                |                |          | City<br>State<br>Country    |
|      |                |                |          | City<br>State<br>Country    |

**FOREIGN ENTITIES**

Is there any foreign entity

- 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 subsidizes any activity 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 the outcome of any lobbying activity?

☒ No --> Sign and date the registration.

☐ Yes --> Complete the rest of this section for each entity matching the criteria above, then sign the registration.

| Name | Street<br>City | Address<br>State/Province | Country | Principal place of business<br>(city and state or country) | Amount of contribution<br>for lobbying activities |
|------|----------------|---------------------------|---------|------------------------------------------------------------|---------------------------------------------------|
|      |                |                           |         | City<br>State<br>Country                                   |                                                   |
|      |                |                           |         | City<br>State<br>Country                                   |                                                   |

Signature

*Ellen C. Williams*

Date 04/1

Printed Name and Title Ellen C. Williams, President

