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# LOBBYING REPORT

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

1. Registrant Name <u>THE HOME DEPOT</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>2455 PACES FERRY RD</u>			
3. Principal Place of Business (if different from line 2) City: <u>ATLANTA</u> State/Zip (or Country) <u>GA 30339</u>			
4. Contact Name <u>JOANNE CHESLER</u>	Telephone <u>770) 384-2712</u>	E-mail (optional)	5. Senate ID # <u>5671</u>
7. Client Name <input type="checkbox"/> Self			6. House ID # <u>3577</u>

**TYPE OF REPORT** 8. Year 2001 Midyear (January 1-June 30)  OR Year End (July 1-D

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 Lobby

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13	
<p align="center"><b>12. Lobbying Firms</b></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 type="checkbox"/> ⇒ \$ _____  <small>Income (nearest \$20,000)</small></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"><b>13. Organizations</b></p> <p>EXPENSES relating to lobbying activities for this period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____  <small>Expenses (nearest \$2</small></p> <p><b>14. REPORTING METHOD.</b> Check box to indicate accounting method. See instructions for description</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA defi</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 1 Internal Revenue Code</p>

Signature *Joanne Chesler*  
 Printed Name and Title JOANNE CHESLER, DIR. GOV. RELATI



Registrant Name THE HOME DEPOT Client Name THE HOME DEPOT

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each information as requested. Attach additional page(s) as needed.

15. General issue area code \_\_\_\_\_ (one per page)

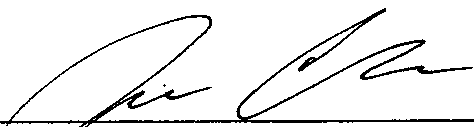
16. Specific lobbying issues

17. House(s) of Congress and Federal agencies contacted  Check if None

18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)

19. Interest of each foreign entity in the specific issues listed on line 16 above  Check if None

Signature  Date \_\_\_\_\_  
Printed Name and Title JOANNE CHESLER, DIR GOVERNMENT &

