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SECRETARY OF THE SENATE

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LOBBYING REPORT

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

1. Registrant Name TUTTLE TAYLOR & HERON			
2. Address <input type="checkbox"/> Check if different than previously reported 1025 THOMAS JEFFERSON ST. NW, STE 502 EAST			
3. Principal Place of Business (if different from line 2) City: WASHINGTON State/Zip (or Country) DC 20007			
4. Contact Name JULIAN B. HERON	Telephone (202) 342-1300	E-mail (optional) julianheron@msn.com	5. Senate ID # 386
7. Client Name <input type="checkbox"/> Self NATIONAL MILK PRODUCERS FEDERATION			6. House ID # 3299

TYPE OF REPORT 8. Year 2003 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 02/01/2004

11. No Lobby

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p>12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Income (nearest \$20,000)</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>13. Organizations</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"/> ⇒ \$ _____ Expenses (nearest \$)</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for descriptive</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA de</p> <p><input type="checkbox"/> Method B. Reporting amounts under section Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section Internal Revenue Code</p>
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Registrant Name TUTTLE TAYLOR & HERON Client Name NATIONAL MILK PRODUCERS F

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the 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.

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15. General issue area code AGR (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)
JULIAN B. HERON	

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Circumstances

Julian B Heron

Date 12 Feb 86

Signature

Printed Name and Title

Sullivan B HERON Partner

Form LD-2 (Rev 6/98)