Clerk of the House of Representatives Secretary of the Senate Legislative Resource Center B-106 Cannon Building Washington, DC 20515

Office of Public Records 232 Hart Building Washington, DC 20510



LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

	ck if this is an Amen	`	1 Effecti	ve Date of Registration	2/4/04		
2.	House Identification	•		entification Number			
DE	CICTDANT	<u> </u>	·				
K E 3.	CGISTRANT Registrant Name	Williams & Jensen, PC					
	Address	1155 21st Street, NW		Suite 300			
	City	Washington	State DG	· · · · · · · · · · · · · · · · · · ·			
4.		usiness (if different from line 3)	State/Zip	(or Country)			
5.	Telephone number and contact name Contact E-Mail (optional) 202-659-8201 Barbara W. Bonfiglio						
6.	General description Law Firm	of registrant's business or activities					
CI		bbying firm is required to file a separate reg		lient. Organizations employing	in-house lobbyists should che		
7.	Client Name	ent Name Wine & Spirits Wholesalers of America					
	Address	805 15th Street NW		Suite 430			
	City	Washington	State D	C Zip 20005			
8.	Principal place of b	ousiness (if different from line 7)	State/Zij	p (or Country)			
9.	-	n of client's business or activities utors of wine and spirits					
	in this section has s	vidual who has acted or is expected to served as a "covered executive branch byist for this client, state the executive	official" or "cove	red legislative branch offici	al" within two years of		
	Name			Covered Official Positi	on (if applicable)		
	Michael Beer			Senior Leg. Assistant Rep. Hobson			
	Christopher Hatcher			Leg. Director of Rep. Scott McInnis			
Susan B. Hirshmann				Chief of Staff Majority Whip			

Form LD-1 (Rev. 06/98)

Registrant Name:	Williams & Jensen, PC Wine & Spirits Wholesalers of America								
Client Name:									
LOBBYING I 11. General lobby ALC, BEV		all applicable codes listed ir	instructions and on the rev	erse side c	of Form LD-1, page 1.				
12. Specific lobby									
13. Is there an ent semiannual pe	eriod and in whole or r	nt that contributes more than najor part plans, supervises,	or controls the registrant's le	obbying ac	ctivities?				
🔀 No. Go to	line 14.	☐ Yes.	criteria above, then proce		tion for each entity matching the to line 14.				
	Name	A	ddress		Principal Place of Busing (city and state or country)				
b) direction of the c) is an	oreign entity that: s at least 20% equitabletly or indirectly, in whe client or any organize	le ownership in the client or nole or in major part, plans, a cation identified on line 13; of or any organization identifie	supervises, controls, directs, or	, finances,	or subsidizes activities				
🔀 No. Sign	and date the registration	on.		Complete the rest of this section for each entity matchin criteria above, the sign and date the registration.					
Name		Address	Principal Place of But (city and state or cou	1	Amount of contribution for lobbying activities				
Signature	may	Bonfigli	0	Date	3/19/2004				

Filing #370ac9b5-eaf9-49da-8282-e3977f2d94f0 - Page 3 of 4

Form LD-1 (Rev. 06/98)

P