

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
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SECRETARY

05 FEB 25

# LOBBYING REPORT

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

1. Registrant name  
Organization Theodosios Consultants

2. Address  Check if different than previously reported  
Address 2029 MERRY OAKS COURT  
City Vienna State VA Zip Code 22182-4029 Country U

3. Principal place of business (if different than line 2)  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Country \_\_\_\_\_  
State/Zip or Country \_\_\_\_\_

4a. Contact Name Prefix Full Name b. Telephone number c. E-mail  
Mr. Phillip Theodosios 571 212 9480 thegreekuser@att

5. Senate ID # 54621-12

7. Client Name  self  
Theodosios Consultants

6. House ID # 3507300

TYPE OF REPORT 8. Year 2004 Midyear (January 1-June 30)  OR Year End (July 1-December)

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 Lobbying A

## INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activities for this reporting period were:
Less than \$10,000 <input type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ <u>68,000</u> <sup>±</sup>	\$10,000 or more <input type="checkbox"/> ⇨ \$ _____
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).	14. REPORTING METHOD. Check box to indicate e: accounting method. See instructions for description of o
	<input type="checkbox"/> Method A. Reporting amounts using LDA definition
	<input type="checkbox"/> Method B. Reporting amounts under section 6033(b) Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under section 162(e) Revenue Code

Form

Printed Name and Title Phillip Theodosios (Consultant) President



Registrant Name Theodosin Cruluta

Client Name Theodosin Cruluta

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which th 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 BUD (one per page)

16. Specific lobbying issues Add page to continue specific issues description for this issue

Appropriation

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

House of Representatives  
United States Senate

18. Name of each individual who acted as a lobbyist in this issue area Add a page to continue adding lobbyists fo

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
Philip	Theodosin		President

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

Add a page for a dil

Printed Name and Title

Jerry M. M... ..

LD-2DS (REV. 4/03)

Page \_

Registrant Name Theodosin Cruleata Client Name Theodosin Cruleata

**Information Update Page - Complete ONLY where registration information has changed.**

20. Client new address

Address

City State Zip Code Country

21. Client new principal place of business (if different than line 20)

City State Zip Code Country

22. New general description of client's business or activities

**LOBBYIST UPDATE**

23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client

First Name	Last Name	Suffix	First Name	Last Name
<input type="checkbox"/>			<input type="checkbox"/>	
<input type="checkbox"/>			<input type="checkbox"/>	

**ISSUE UPDATE**

Find the code to select below.

24. General lobbying issues that **no longer** pertain

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

Name	Address	Principal place of Busir (city and state or cour
	Address C/S/Z	City State Country
	Address C/S/Z	City State

26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
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**FOREIGN ENTITIES**

27. Add the following foreign entities

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities	C P c
Street Address City	State/Province Country	City State Country		

28. Name of each previously reported foreign entity that **no longer** owns, **or** controls, **or** is affiliated with the registrant affiliated organization

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Add a page for mor

Printed Name and Title Princip Theodosin Prudent

