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LOBBYING REPORT

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

1. Registrant Name LOCKRIDGE GRINDAL NAUEN P.L.L.P.			
2. Address <input type="checkbox"/> Check if different than previously reported 660 PENNSYLVANIA AVENUE SE, SUITE 301			
3. Principal Place of Business (if different from line 2) WASHINGTON City: DC 20003 State/zip (or Country)			
4. Contact Name DENNIS McGRANN	Telephone (202) 544-9840	E-mail (optional)	5. Senate ID # 23053-571
7. Client Name <input type="checkbox"/> Self NATIONAL COALITION OF PARENT CENTERS			6. House ID # 31034016

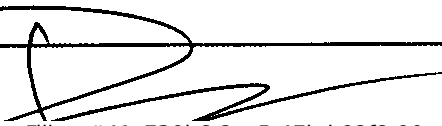
TYPE OF REPORT 8. Year 2003 Midyear (January 1-June 30) OR Year End (July 1-December 31)

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

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13	
<p align="center">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 align="center">13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(e) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code</p>



Signature _____ Date _____

Printed Name and Title _____
DENNIS McGRANN, DIRECTOR OF PUBLIC AFFAIRS

Registrant Name DOCKRIDGE GRINDAL NAUEN P.L.L.P Client Name NATIONAL COALITION OF PARENT CENTE

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 code information as requested. Attach additional page(s) as needed.

15. General issue area code BUD (one per page)

16. Specific lobbying issues

FISCAL YEAR 2004 APPROPRIATIONS


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

U.S. HOUSE OF REPRESENTATIVES
U.S. SENATE
U.S. DEPARTMENT OF EDUCATION

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

Name	Covered Official Position (if applicable)
DENNIS McGRANN	DIRECTOR OF PUBLIC AFFAIRS
JENNIFER SWEENEY	SENIOR FEDERAL RELATIONS SPECIALIST

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

Signature  Date 8-12-04

Printed Name and Title DENNIS McGRANN, DIRECTOR OF PUBLIC AFFAIRS

Form LD-2 (Rec. 4/03)

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Registrant Name DOCKRIDGE GRINDAL NAUEN P.L.L.P Client Name NATIONAL COALITION OF PARENT CENTER

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 code information as requested. Attach additional page(s) as needed.

15. General issue area code EDU (one per page)

16. Specific lobbying issues

REAUTHORIZATION OF IDEA


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

U.S. HOUSE OF REPRESENTATIVES
U.S. SENATE
U.S. DEPARTMENT OF EDUCATION

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

Name	Covered Official Position (if applicable)
DENNIS McGRANN	DIRECTOR OF PUBLIC AFFAIRS
JENNIFER SWEENEY	SENIOR FEDERAL RELATIONS SPECIALIST

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

Signature  Date 8-16-00

Registrant Name DOCKRIDGE GRINDAL NAUEN P.L.L.P Client Name NATIONAL COALITION OF PARENT CE

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

20. Client new address

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

City _____ State/Zip (or 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

AMY M. JOHNSON

ISSUE UPDATE

24. General lobbying issues previously reported that no longer pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Bu (city and state or cot

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

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

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

Signature _____

Date 8-12-

Printed Name and Title DENNIS McGRANN, DIRECTOR OF PUBLIC AFFAIRS

Form LD-2 (Rev. 4/03)

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