

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 OF THE SENATE

05 FEB 24 AM 11:02

LOBBYING REPORT

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

1. Registrant name				
Organization	Washington Strategies, LLC			
2. Address <input type="checkbox"/> Check if different than previously reported				
Address1	2111 Wilson Boulevard, Suite 600			
City	Arlington	State	VA	Zip Code 22201 Country USA
3. Principal place of business (if different than line 2)				
City	State	Zip Code	Country	
4a. Contact Name		b. Telephone number	c. E-mail	5. Senate ID #
Prefix	Full Name			
Ms.	Monica Barron	703-351-5030		4066895
7. Client Name <input type="checkbox"/> Self				6. House ID #
Alliance for Consumer Education				3249045

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 Activity

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 type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ <u>10,000</u></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 were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ <u> </u></p> <p>14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitions of</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of Internal Revenue Code</p>
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Form C

Printed Name and Title Jennifer Johnson Calvert, Partner

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Registrant Name Washington Strategies, LLC Client Name Alliance for Consumer Education

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 - Budget/Appropriations (one per page)

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

Federal Appropriations

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

U.S. House of Representatives
U.S. Senate
U.S. Health and Human Services

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

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
William P.	Jarrell		
Jennifer J.	Calvert		
Mark A.	O'Connell		
Marissa J.	Peden		

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

Add a page to a diffe

Printed Name and Title Jennifer Johnson Calvert, Partner

LD-2DS (REV. 4/03)

Registrant Name Washington Strategies, LLC Client Name Alliance for Consumer Education

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 CSP - Consumer Issues/Safety/Protection (one per page)

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

Consumer Issues/Safety/Protection

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

U.S. House of Representatives
U.S. Senate
U.S. Health and Human Services

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

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
William P.	Jarrell		
Jennifer J.	Calvert		
Mark A.	O'Connell		
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19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Add a page for a diff

Printed Name and Title Jennifer Johnson Calvert, Partner

LD-2DS (REV. 4/03)

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Registrant Name Washington Strategies, LLC Client Name Alliance for Consumer Education

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 - Education (one per page)

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

Education

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

U.S. House of Representatives
U.S. Senate
U.S. Health and Human Services

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

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
William P.	Jarrell		
Jennifer J.	Calvert		
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19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Registrant Name Washington Strategies, LLC Client Name Alliance for Consumer Education

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 cod information as requested. Attach additional page(s) as needed.**

15. General issue area code HCR - Health Issues (one per page)

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

Health Issues

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

U.S. House of Representatives
U.S. Senate
U.S. Health and Human Services

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

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
William P.	Jarrell		
Jennifer J.	Calvert		
Mark A.	O'Connell		
Marissa J.	Peden		

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Add a page for a diff

Registrant Name Washington Strategies, LLC Client Name Alliance for Consumer Education

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"/> Allison S.	DeKosky		<input type="checkbox"/>	
<input type="checkbox"/> Troy	Tidwell		<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 Business (city and state or country)
	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	Ownership percentage
	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 more

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