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 SECRETARY OF THE SENATE

05 FEB 14 PM 3: 52

## **LOBBYING REPORT**

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

1. Registrant name			
Organization American Council for Voluntary Intern	ational Action		
2. Address Check if different than previously reported			
Address 1 1717 Massachusetts Avenue, NW	Suite 701		
City Washington State DC	Zip Code 20036	Country USF	
3. Principal place of business (if different than line 2)			
City State	Zip Code	Country	
City State/21  4a. Contact Name b. Telephone number	p or Country c. E-mail	5. Senate ID#	
Prefix Full Name  Ms. Nisha Desai 202-667-8227 ndes	ai@interaction.org	52606-12	
7. Client Name Self		6. House ID#	
American Council for Voluntary International Action		32191000	
10. Check if this is a Termination Report    □ ⇒ Termination Date  INCOME OR EXPENSES - Complete Either Line 1	2 OR Line 13	11. No Lobbying Activ	
12. Lobbying Firms	13. Organizations		
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying were:	g activities for this reporting	
Less than \$10,000	Less than \$10,000		
\$10,000 or more	\$10,000 or more  □	\$ 71,012.2	
Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all	14. REPORTING METHOD. accounting method. See instruc		
payments to the registrant by any other entity for lobbying activities on behalf of the client).	I	nounts using LDA definitions on nounts under section 6033(b)(8 enue Code	
	Method C. Reporting an Revenue Coc	nounts under section 162(e) of	

Filing #42e21c45-ca00-481e-8653-d25d6e9c525c - Page 1 of 6

egistrant Name _	American Council for \	/oluntary Internat	Client Name American Council for Voluntary Inter
ngaged in lobby	CTIVITY. Select as ying on behalf of the c equested. Attach addi	lient during the r	ecessary to reflect the general issue areas in which the eporting period. Using a separate page for each cod needed.
5. General issue	e area code	reign Relations	(one per page)
6. Specific lobb	ying issues		Add page to continue specific issues description for this issue
	hallenge Account es related to the crisis	in the Caribbean	
House	Congress and Federal	agencies contac	ted Check if None
House Senate White House State Departs 8. Name of each			
House Senate White House State Departs 8. Name of each	ment ch individual who acte Name Last Name	ed as a lobbyist i Suffix	n this issue area Add a page to continue additing lobbyists lo Covered Official Position (if applicable)
House Senate White House State Departs  8. Name of each First Name	ment ch individual who acte Name Last Name Desai	ed as a lobbyist i Suffix Ms.	n this issue area Add a page to continue additing lobbyists lo  Covered Official Position (if applicable)  Director of Public Policy
House Senate White House State Departs  8. Name of each First Name	ment ch individual who acte Name Last Name Desai	ed as a lobbyist i Suffix Ms.	n this issue area Add a page to continue additing lobbyists los Covered Official Position (if applicable) Director of Public Policy
House Senate White House State Departs  8. Name of each First Name	ment ch individual who acte Name Last Name Desai	ed as a lobbyist i Suffix Ms.	n this issue area Add a page to continue additing lobbyists for Covered Official Position (if applicable) Director of Public Policy

Add a page for a differ

2/10/05

Filing #42e21c45-ca00-481e-8653-d25d6e9c525c - Page 3 of 6

LD-2DS (REV. 4/03)

Page 2

	ate Page - Complete C		· · · · · · · · · · · · · · · · · · ·		
20. Client new address					
City		State	Zip Code	Country	j
	al place of business (if differer	nt than line 20)	***************************************		
City		State	Zip Code	Country	y
22. New general descri	ption of client's business or a	ctivities	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
LOBBYIST UPDA 23. Name of each pre	eviously reported individua	l who is <b>no longer</b> e	xpected to act as	a lobbyist for the cli	ient
First Name	Last Name	Suffix 3	First Name	Last Name	Sı
2		4			
ISSUE UPDATE		Fi	nd the code to se	elect below.	
24. General lobbying	issues that <b>no longer</b> perta	ıin			
AFFILIATED OR	GANIZATIONS				
25. Add the following	g affiliated organization(s)			D '	
Name		Address		Principal place of Busine (city and state or countr	
	Address			City	
	C/S/Z			State Cou	ntry
	Address C/S/Z			City State	
26. Name of each pro	eviously reported organizat	tion that is <b>no longe</b> r	affiliated with the	he registrant or clien	.t
	2		3		
FOREIGN ENTI					
1	g foreign entities Address Street Address	(city and	place of business state or country)	Amount of contribution for lobbying activities	pe
FOREIGN ENTI: 27. Add the followin	g foreign entities Address Street Address		=		Ov pe cli
FOREIGN ENTI: 27. Add the followin	g foreign entities Address Street Address	ince Country (city and	=		pe
FOREIGN ENTI' 27. Add the followin Name	g foreign entities Address Street Address	(city and City State	state or country)  Country	for lobbying activities	pe cli
FOREIGN ENTI' 27. Add the followin Name	g foreign entities    Address     Street Address     City   State/Provi	(city and City State	Country  or controls, or is a	for lobbying activities	pe cli
FOREIGN ENTI' 27. Add the followin Name	g foreign entities    Address     Street Address     City   State/Provi	(city and City State	Country  or controls, or is a	for lobbying activities	pe cli
FOREIGN ENTI' 27. Add the followin Name  28. Name of each prev	g foreign entities    Address     Street Address     City   State/Provi	(city and City State	Country  or controls, or is a	for lobbying activities	stran
FOREIGN ENTI' 27. Add the followin Name	g foreign entities    Address     Street Address     City   State/Provi	(city and City State	Country  or controls, or is a	for lobbying activities	pe cl stran

Page 3