

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 C
07 APR 12 1

LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration

1. Effective Date of Registration 4-1-

2. House Identification Number _____

Senate Identification Number _____

REGISTRANT

3. Registrant name Foley Government & Public Affairs

Address

City

State MD Zip 208

4. Principal place of business (if different from line 3)

City

State/Zip (or Country) DC

5. Telephone number and contact name

() 301-294-0937 Contact Joe Foley

E-mail (optional)

6. General description of registrant's business or activities

Promotion of clients' government relations

CLIENT A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should

labeled "Self" and proceed to line 10. Self

7. Client name

Address

City

State FL Zip 336

8. Principal place of business (if different from line 7)

City

State/Zip (or Country)

9. General description of client's business or activities

Weather alerts & emergency programs

LOBBYISTS

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any this section has served as a "covered executive branch official" or "covered legislative branch official" within the executive branch or legislative branch, acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
<u>Joe Foley</u>	

3000052455

Registrant Name Foley Government & Public Affairs Inc Client Name Early Ale

LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD

GOV DIS SMB SCI

12. Specific lobbying issues (current and anticipated)

Matters related to weather, homeland security and incident management training program

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying

No ⇒ Go to line 14. Yes ↓ Complete the rest of this section for each entity the criteria above, then proceed to line 14.

Name	Address	Principal Place of Business (city and state or country)

FOREIGN ENTITIES

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; **OR**
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or activities of the client or any organization identified on line 13; **OR**
- c) is an affiliate of the client or any organization identified on line 13 and has a direct interest in the lobbying activity?

No ⇒ Sign and date the registration. Yes ↓ Complete the rest of this section for each matching the criteria above, then sign a registration.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities

Signature Joseph P. Foley Date 4-1-07

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Printed Name and Title

Joseph P. Foley, President

Form LD-1 (Rev. 06/98)