

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  
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# LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration

1. Effective Date of Registration 9/22/2003

2. House Identification Number \_\_\_\_\_

Senate Identification Number \_\_\_\_\_

## REGISTRANT

3. Registrant name Cassidy & Associates

Address 1 Walnut Street

City Boston

State MA

Zip 02108

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

City \_\_\_\_\_

State/Zip (or Country) \_\_\_\_\_

5. Telephone number and contact name

(617) 305-4161

Contact David J. Oliveira

E-mail (optional) \_\_\_\_\_

6. General description of registrant's business or activities

Consultants in Government Relations

**CLIENT** *A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should check labeled "Self" and proceed to line 10.*  Self

7. Client name The New Bedford Whaling Museum

Address 18 Johnny Cake Hill

City New Bedford

State MA

Zip 02740

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

City \_\_\_\_\_

State/Zip (or Country) \_\_\_\_\_

9. General description of client's business or activities

Museum

## 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 person in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years 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>David J. Oliveira</u>	

Form LD-1 (Rev. 04/03)



Registrant Name Cassidy & Associates Client Name The New Bedford Whaling Museum

**LOBBYING ISSUES**

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-1, pa

EDU

12. Specific lobbying issues (current and anticipated)

Seek funding for authorized program in Labor, HHS, ED, Appropriations bills.

**AFFILIATED ORGANIZATIONS**

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

No → Go to line 14.

Yes ↓ Complete the rest of this section for each entity matching 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 subsidizes lobbying 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 outcome of the lobbying activity?

No → Sign and date the registration.

Yes ↓ Complete the rest of this section for each entity matching the criteria above, then sign and date the registration.

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

Signature *David J. Oliveira* Date 09/22/2003

Printed Name and Title David J. Oliveira, Senior Vice President & General Counsel

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