

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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## LOBBYING REPORT

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

1. Registrant name			
Organization	The Advocacy Group		
2. Address <input type="checkbox"/> Check if different than previously reported			
Address1	1350 I Street, N.W.	Suite 680	
City	Washington	State DC	Zip Code 20005 Country USA
3. Principal place of business (if different than line 2)			
City	State	Zip Code	Country
City	State/Zip or Country		
4a. Contact Name		b. Telephone number	c. E-mail
Prefix	Full Name		
Mr.	George A. Ramonas	202-393-4841	carolined@advocacy.com
7. Client Name <input type="checkbox"/> Self			5. Senate ID #
Connecticut State University System			261-1130
			6. House ID #
			30018084

TYPE OF REPORT 8. Year 2006 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 Activities

### INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p align="center"><b>12. Lobbying Firms</b></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>60,000</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"><b>13. Organizations</b></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"/> ⇨ \$ _____</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate expense accounting method. See instructions for description of optional</p> <p><input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definitions only</p> <p><input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033(b)(8) of Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(e) of the Revenue Code</p>
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Form Co

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Printed Name and Title George A. Ramonas 2/6/07



Registrant Name The Advocacy Group Client Name Connecticut State University System

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the registrant 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* >

HR 5647/ S. 3708 Labor HHS Appropriations  
HR 5384 Agriculture Appropriations  
HR 5631 Defense appropriations  
HR 5672 Commerce, Science State

17. House(s) of Congress and Federal agencies contacted  None  House  Senate  Other

[Empty box for listing contacted agencies]

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

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
Robert J.	Dotchin	Mr.	
Robert e.	Mills	Mr.	
Suzy	Glucksman	Ms.	

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

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Registrant Name The Advocacy Group Client Name Connecticut State University System

**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

Suffix

1

3

2

4

**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	City
	C/S/Z	State
	Address	Country
	C/S/Z	City
		State

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

1

2

3

**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	Owner per client
	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, or affiliated organization

1

3

5

2

4

6

Add a page for more up

Printed Name and Title

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