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LOBBYING REPORT

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

1. Registrant Name Hobbs, Straus, Dean & Walker, LLP			
2. Registrant Address <input type="checkbox"/> Check if different than previously reported Address 2120 L Street, NW Suite 700 City Washington State/Zip (or Country) DC 20037			
3. Principal Place of Business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name Carol L. Barbero	Telephone 202-822-8282	E-mail (optional) cbarbero@hswdc.com	5. Senate ID # 18364-327
7. Client Name <input type="checkbox"/> Self Shiprock Alternative Schools, Inc.			6. House ID # 31356019

TYPE OF REPORT 8. Year 2004 Midyear (January 1-June 30) OR Year End (July 1-De

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 Lobby

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
<p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> >> \$ _____ Income (nearest \$20,000)</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>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"/> >> \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definit</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 603: the Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162: Internal Revenue Code</p>

Signature

Date **2/14/2005**

Signature _____ Date _____

Printed Name and Title **Carol L. Barbero - Partner** _____ Page

Registrant Name: **Hobbs, Straus, Dean & Walker, LLP**

Client Name: **Shiprock Alternative Schools, Inc.**

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

- 15. General issue area code **IND** (one per page)
- 16. Specific Lobbying issues
contract proposal
staff quarters contract

- 17. House(s) of Congress and Federal agencies contacted Check if None
Department of the Interior

18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)
Barbero, Carol L.	
Dean, S. Bobo	
Frechette, Heidi	

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

Signature _____ Date _____

Printed Name and Title **Carol L. Barbero - Partner** _____ Pa

Registrant Name: Hobbs, Straus, Dean & Walker, LLP

Client Name: Shiprock Alternative Schools, Inc.

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address

21. Client new principal place of business (if different from line 20)

City

State/Zip (or 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
Binney, Allison

ISSUE UPDATE

24. General lobbying issues previously reported that **no longer** pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

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

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

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

28. Name of each previously reported foreign entity that **no longer** owns, or controls, or is affiliated with the registrant or affiliated organization

[Handwritten Signature]

Signature _____ Date _____

Printed Name and Title **Carol L. Barbero - Partner** _____ Pa