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| 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 T.
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LOBBYING REPORT

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

| | | | |
|---|----------------------------------|-------------------|-----------------------|
| 1. Registrant Name <i>Chernikoff + Company</i> | | | |
| 2. Address <input type="checkbox"/> Check if different than previously reported <i>1229 19th Street, NW Washington, DC 20036</i> | | | |
| 3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____ | | | |
| 4. Contact Name <i>Larry Chernikoff</i> | Telephone <i>202 223-9280</i> | E-mail (optional) | 5. Senat <i>80</i> |
| 7. Client Name <input type="checkbox"/> Self <i>Facing History + Ourselves National Foundation</i> | | | 6. House <i>31</i> |

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

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 Lot

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms

INCOME relating to lobbying activities for this reporting period was:

Less than \$10,000

\$10,000 or more ⇒ \$ 20,000
Income (nearest \$20,000)

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).

13. Organizations

EXPENSES relating to lobbying activities for the period were:

Less than \$10,000

\$10,000 or more ⇒ \$ _____
Expenses (nearest

14. REPORTING METHOD. Check box to indicate accounting method. See instructions for descriptive

Method A. Reporting amounts using LDA d

Method B. Reporting amounts under section Internal Revenue Code

Method C. Reporting amounts under section Internal Revenue Code

Signature _____

[Handwritten signature]

Printed Name and Title _____

Larry Chernikoff

President

LD-2 (REV. 6/98)

Registrant Name Charu Koff + Co. Client Name Facing History + Ourselves Ne

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each information as requested. Attach additional page(s) as needed.

15. General issue area code EDU (one per page)

16. Specific lobbying issues

Foreign Operations Appropriations b.d
H. R. 4818

17. House(s) of Congress and Federal agencies contacted Check if None

House
Senate

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

| Name | Covered Official Position (if applicable) |
|-------|---|
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19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Signature *Jay Koff* Date *23 Aug 0*

Printed Name and Title Larry Charnikoff President

Form LD-2 (Rev. 6/98)

P: