

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

05 JUN -1

LOBBYING REPORT

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

1. Registrant name			
Organization	Cones Communications, LLC		
2. Address <input type="checkbox"/> Check if different than previously reported			
711 S. 20th St.			
City	Arlington	State	VA
Zip Code	22202	Country	US
3. Principal place of business (if different than line 2)			
City	State	Zip Code	Country
City	State/Zip or Country	Zip Code	Country
4a. Contact Name		b. Telephone number	c. E-mail
Prefix	Full Name		
Ms.	Carole Cones	703/920-5265	ckcones@aol.com
7. Client Name <input type="checkbox"/> Self			5. Senate ID #
Safe Blood for Africa Foundation			67752-12
			6. House ID #
			35693000

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

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 Activity

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p align="center">12. Lobbying Firms</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>10,000</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">13. Organizations</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>14. REPORTING METHOD. Check box to indicate expert accounting method. See instructions for description of options</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitions on</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Revenue Code</p>
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Form 601

Printed Name and Title Carole K. Cones

Registrant Name Cones Communications, LLC Client Name Safe Blood for Africa Foundation

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which the 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 FOR - Foreign Relations (one per page)

16. Specific lobbying issues

Promote interest in, and support of, funding for blood safety programs as an important means of preventing the spread of HIV/AIDS and other blood borne-diseases internationally, but primarily in sub-Saharan Africa such as those being conducted by the Safe Blood for Africa Foundation.

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

US Congress (House and Senate)
USAID
Department of HHS/CDC/NIH
Department of State/Office of Global AIDS Coordinator
OMB

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

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
Carole	Cones	Ms.	

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

_____ *Samuel H. Jones, Jr.* _____