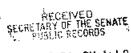
Clerk of the House of Representatives Lugislative Resource Center B-106 Cannon Building Washington, DC 20515

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Secretary of the Senate Office of Public Records 232 Hart Huifding Washington, DC 20510



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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration	Effective Date of Registration 1/23/01
2. House Identification Number	Senate Identification Number
REGISTRANT 3. Registrant Name Manatt, Phelps & Phillips	
Address 1501 M Street, NW, Suite 700	
City Washington, D.C.	State Zip 20005
4. Principal place of business (if different from line 3)	
City same as above	State/Zip (or Country)
Telephone number and contact name (202) 463-4300	Watters E-mail (optional)
6. General description of registrant's business or activities	Law firm
CLIENT A Labbring farm is required to file a separate registration check the box labeled "Self" and proceed to line 10. 7. Client Name Campbell Foundry Company	tasement för each cliens. Organizations employing in-hause lobbyists should Self
Address 800 Bergen Street	
City Harrison	State NJ Zip 07029
8. Principal place of business (if different from line 7)	
City same as above	State/Zip (or Country)
9. General description of client's business or activities	Foundry
	at as a lobbyist for the client identified on line 7. If any person nech official" or "covered legislative branch official" within two "cutive and/or legislative position(s) in which the person served. Covered Official Position (if applicable)
Robb Watters	Senior Advisor
John Lucas Rose	Legislative Advisor
Walter Gonzalez	Legislative Assistant
Form LD-1 (Rev. 06/98)	Page 1

AFFILIATED ORGANIZATIONS 3. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in a semiannual period and in whole or in major part plans, supervises or controls the registrant's tobbying activities? ■ No → Go to line 14.		fanatt, Phelps & Phillips	Client Name Campbell Foun	SILY COMPANY	
Customs Service Duty Imposition AFFILIATED ORGANIZATIONS 13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in a senianunal period and in whole or in major part plans, supervises or controls the registrant's tobbying activities? No → Go to line 14. Yes & Complete the rest of this section for each entity matching the criteria above, then proceed to line 14. Name Address Principal Place of Business (city and state or country) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsidizes activities of the client or any organization identified on line 13, or o) 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. O 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) Date Principal place of business (city and state or country) Date Principal place of business (city and state or country) Date Principal place of business (city and state or country)			codes listed in instructions and on t	he reverse side of For	m LD-1, page l
AFFILIATED ORGANIZATIONS 13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in a semiannual period and in whole or in major part plans, supervises or controls the registrant's tobbying activities? ■ No → Go to line 14.	GOV TRD	***************************************			
AFFILIATED ORGANIZATIONS 13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying activities? ■ No → Go to line 14.	2. Specific lobbying issues	(current and anticipated)			
13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the registrant in a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying activities? No → Go to line 14.	Customs Service I	Outy Imposition			
The criteria above, then proceed to line 14. Name Address Principal Place of Business (city and state or country) FOREIGN ENTITIES 4. Is there any foreign entity that: a) holds at least 20% equitable ownership in the client or any organization identified on tine 13; or b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsidizes 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 5 Sign and date the registration. O Yes 3 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) lobbying activities in client Ownership percentage in client Gignature Date Principal Place of contribution for lobbying activities in client Robb Watters, Senior Advisor	3. Is there an entity other t	han the client that contribut	es more than \$10,000 to the lobbying		
FOREIGN ENTITIES 4. Is there any foreign entity that: a) holds at least 20% equitable ownership in the client or any organization identified on tine 13, or b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or subsidizes 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? E) No =0 Sign and date the registration. C) Yes 3 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 in client Signature Date Printed Name and Title Robb Watters, Senior Advisor	■ No → Go to line	c 14.	Yes & Complete the rest of the criteria above, the	this section for each each each to proceed to line 14.	itity matching
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Name Address Principal place of business (city and state or country) Contribution for lobbying activities in client Signature Date Robb Watters, Senior Advisor	FOREIGN ENTIT	PIES	Ļ	··········	
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