

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

SECRETARY OF THE SENATE

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LOBBYING REPORT

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

1. Registrant Name			
2. Address <input type="checkbox"/> CM <i>WILLIAM M. CLOHERTY 3211 Tennyson Street, N.W. Washington, D.C. 20015-2429</i> Previously reported			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country): _____			
4. Contact <i>WILLIAM M. CLOHERTY 3211 Tennyson Street, N.W. Washington, D.C. 20015-2429</i>		WILLIAM M. CLOHERTY Consultant Tel: 202-363-1861 Fax: 202-363-1639	E-mail (optional)
5. Senate ID #			6. House ID # 31916-011
7. Client Name <input type="checkbox"/> Self ESSEX CORP			

TYPE OF REPORT 8. Year _____ 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 **6-30-2000** 11. No Lobbying Activity

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 <input checked="" type="checkbox"/> \$0. \$10,000 or more <input type="checkbox"/> ⇒ \$ _____ <small>Income (nearest \$20,000)</small> 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 this reporting period were: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input type="checkbox"/> ⇒ \$ _____ <small>Expenses (nearest \$20,000)</small> 14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options. <input type="checkbox"/> Method A. Reporting amounts using LDA definitions only <input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code

Signature

Printed Name and Title

WILLIAM M. CLOHERTY
3211 Tennyson Street, N.W.
Washington, D.C. 20015-2429

WILLIAM M. CLOHERTY
Consultant
Tel: 202-363-1861
Fax: 202-363-1639

LD-2 (REV. 1/98)

PAGE 1 of 3

Registrant Name: **WILLIAM M. CLOHERTY**
3211 Tennyson Street, N.W.
Washington, D.C. 20015-2429

Client Name: **ESSEX CORP.**

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 MED (one per page)

16. Specific lobbying issues

**ADAPT ESSEX TECHNOLOGY
TO MEDICAL PURPOSES**

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

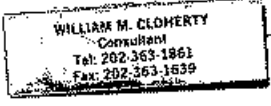
18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)	New
WILLIAM M. CLOHERTY 3211 Tennyson Street, N.W. Washington, D.C. 20015-2429		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature: *William M. Cloherty* Date: 8-11-2000

Printed Name and Title: **WILLIAM M. CLOHERTY**
3211 Tennyson Street, N.W.
Washington, D.C. 20015-2429



Form LD-2 (Rev. 6/98)

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Registrant Name **WILLIAM M. CLOHERTY**
3211 Tenneyson Street, N.W.
Washington, D.C. 20015-2429

Client Name **ESSEX CORP.**

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

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	Ownership percentage in client

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

Signature *William M. Cloherty*

Date **8-11-2000**

Printed Name and Title **WILLIAM M. CLOHERTY**
3211 Tenneyson Street, N.W.
Washington, D.C. 20015-2429

WILLIAM M. CLOHERTY
Consultant
Tel: 202-363-1861
Fax: 202-383-1639

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