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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 RECEIVED 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		
Organization Owner-Operator Independent Drivers	s Association	
2. Address Check if different than previously reported		••••••••••••••••••••••••••••••
1 NW OOIDA Dr	PO Box 1000	
City Grain Valley State M	1O Zip Code 64029	Country USA
3. Principal place of business (if different than line 2)		
City State City State/Z.	Zip Code	Country
4a. Contact Name b. Telephone number Prefix Full Name	c. E-mail	5. Senate ID #
	_spencer@ooida.com	57134-12
7. Client Name Self		6. House ID#
Owner-Operator Independent Drivers Association		35211000
10. Check if this is a Termination Report ☐ ⇒ Termination Date INCOME OR EXPENSES - Complete Either Line 1		11. No Lobbying Activ
12. Lobbying Firms	13. Organ	ıizations
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying as were:	
Less than \$10,000	Less than \$10,000	
\$10,000 or more	\$10,000 or more 🗵 🖒 \$	280,000

Form Co

Printed Name and Title J. Todd Spencer, Executive Vice President

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LOBBYING Accengaged in lobby		many codes as nec client during the rep	essary to reflect the general issue areas in which the porting period. Using a separate page for each code
15. General issue	e area code TRU - Tr	ucking/Shipping	(one per page)
16. Specific lobb	ying issues		Add page to continue specific issues description for this issue >
HR 3 HR 6 S 1052		<u>.</u>	
US House of US Senate Department o Department o	Congress and Federal Representatives f Transportation f Homeland Security n individual who acte	and Small Businesed as a lobbyist in t	s Administration
First Name J. Todd	Last Name Spencer	Suffix	
Rod	Nofziger		
Mike	Joyce		·
Melissa	Theriault		
	ch foreign entity in tl	·	sted on line 16 above

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20. Client new address	te Page - Complete ONLY v	where re	gistration info	rmation has	changed.
Address	<u> </u>			· · · · · · · · · · · · · · · · · · ·	
City		State	Zip Code	:	Country
21. Client new principal	place of business (if different than li	ne 20)	***************************************	***************************************	
		State Zip			Country
22. New general descript	ion of client's business or activities				
LOBBYIST UPDAT					
23. Name of each prev	iously reported individual who is	no longe	r expected to act	as a lobbyist f	or the client
1		3			
2		4			
ISSUE UPDATE					
	ssues that no longer pertain		Find the code to	select below.	
AFFILIATED ORG	ANIZATIONS				
	affiliated organization(s)				
Name		Address		Principal place of Business (city and state or country	
	Address			City	
	C/S/Z			State	Country
					•
	Address			City	·
26 Name of each previ	Address C/S/Z	is no lone	ver affiliated with	State	or client
riores	Address C/S/Z lously reported organization that	is no long		State the registrant	or client
1	Address C/S/Z clously reported organization that 2	is no lon g	ger affiliated with	State the registrant	or client
FOREIGN ENTITI	Address C/S/Z iously reported organization that 2 ES	is n o long		State the registrant	or client
1	Address C/S/Z lously reported organization that 2 ES Oreign entities Address	Princi	pal place of business	State 1 the registrant Amount of cor	ntribution Own
FOREIGN ENTITE 27. Add the following f	Address C/S/Z cously reported organization that 2 ES Coreign entities	Princiț (city a	3	State 1 the registrant	ntribution Own
FOREIGN ENTITE 27. Add the following f	Address C/S/Z clously reported organization that 2 ES Oreign entities Address Address	Princiț (city a	pal place of business	State 1 the registrant Amount of cor	ntribution Own
FOREIGN ENTITION 27. Add the following f	Address C/S/Z clously reported organization that 2 ES Oreign entities Address Address	Princip (city a	pal place of business	State 1 the registrant Amount of cor	ntribution Own
FOREIGN ENTITION 27. Add the following for Name 28. Name of each previous	Address C/S/Z clously reported organization that 2 ES Oreign entities Address Address	Princip (city a City State	pal place of business and state or country) Country	State n the registrant Amount of cor for lobbying a	ntribution Own ctivities percentiles
FOREIGN ENTITION 27. Add the following for Name 28. Name of each previous affiliated organization	Address C/S/Z lously reported organization that 2 ES Oreign entities Street Address City	Princip (city a City State	country Country Solution of the country of the co	Amount of cor for lobbying a	ntribution Own ctivities percentiles
FOREIGN ENTITI 27. Add the following f Name 28. Name of each previous	Address C/S/Z iously reported organization that 2 ES oreign entities Street Address City State/Province Country	Princip (city a City State	country Country S, or controls, or i	State n the registrant Amount of cor for lobbying a	ntribution Own ctivities percentiles

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