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SECRETARY OF THE SENATE
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August 13, 2002

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

Dear Sir or Madam:

Enclosed please find a lobbying registration form filed by APCO Worldwide Inc. ("APCO") for work performed on behalf of the Association of Metropolitan Planning Organizations ("AMPO"). APCO entered into an engagement agreement with AMPO as of March 11, 2002, but the agreement was only recently brought to my attention. I can be reached at 202-778-1042 if you have any questions.

Sincerely,



Lynley A. Ogilvie,
Assistant General Counsel

Enclosures

beijing berlin bonn brussels edinburgh geneva hanoi ho chi minh city hong kong jacksonville jakarta johannesburg
london los angeles moscow ottawa paris phoenix rome sacramento seattle shanghai shenzhen toronto washington, d.c.

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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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration 1. Effective Date of Registration 3/11/20022. House Identification Number 3092-052Senate Identification Number 4117-544**REGISTRANT**3. Registrant name APCO Worldwide Inc.Address 1615 L Street, NW, Suite 900City WashingtonState DCZip 20036

4. Principal place of business (if different from line 3)

City N/A

State/Zip (or Country)

5. Telephone number and contact name

(202) 778-1042Contact Lynley A. Ogilvie, Esq.

E-mail (optional)

6. General description of registrant's business or activities

Public relations and strategic communications

CLIENT *A Lobbying firm is required to file a separate registration for each client. Organizations employing in-house lobbyists should be labeled "Self" and proceed to line 10.* Self

7. Client name Assn. of Metropolitan Planning OrganizationsAddress 1634 I Street, NWCity WashingtonState DCZip 20008

8. Principal place of business (if different from line 7)

City N/A

State/Zip (or Country)

9. General description of client's business or activities

National association of metropolitan planning organizations**LOBBYISTS**

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any person in this section has served as a "covered executive branch official" or "covered legislative branch official" within two years of acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if applicable)
<u>Barry Schumacher</u>	
<u>Jonathan Gregory</u>	
<u>Derek Roseman</u>	
<u>Don Riegle</u>	
<u>Don Bonker</u>	

|

Registrant Name APCO Worldwide Inc. Client Name Assn. of Metropolitan Planning Organizatio

LOBBYING ISSUES

11. General lobbying issue areas. Select all applicable codes listed in instructions and on the reverse side of Form LD-

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12. Specific lobbying issues (current and anticipated)

AFFILIATED ORGANIZATIONS

13. Is there an entity other than the client that contributes more than \$10,000 to the lobbying activities of the a semiannual period and in whole or in major part plans, supervises or controls the registrant's lobbying

No ⇒ Go to line 14.

Yes ↓ Complete the rest of this section for each entity the criteria above, then proceed to line 14.

Name	Address	Principal Place of Bu: (city and state or cot

FOREIGN ENTITIES

14. Is there any foreign entity that:

- a) holds at least 20% equitable ownership in the client or any organization identified on line 13; **OR**
- b) directly or indirectly, in whole or in major part, plans, supervises, controls, directs, finances or 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 1 of the lobbying activity?

No ⇒ Sign and date the registration.

Yes ↓ Complete the rest of this section for es matching the criteria above, then sign registration.

Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities

Signature Lynley A. Ogilvie Date _____

Printed Name and Title Lynley A. Ogilvie, Assistant General Counsel

