

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 THE SENATE

05 FEB 23 AM 10:31

LOBBYING REPORT

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

1. Registrant name			
Organization	The Accord Group, Inc.		
2. Address <input type="checkbox"/> Check if different than previously reported			
Address 1	1730 Rhode Island Avenue, NW	Suite	700
City	Washington	State	DC
		Zip Code	20036
		Country	U
3. Principal place of business (if different than line 2)			
City		State	
		Zip Code	
		State/Zip or Country	
4a. Contact Name		b. Telephone number	c. E-mail
Prefix	Full Name		
Mr.	Jeff More	202-289-9800	jmore@theaccordgroup.com
7. Client Name <input type="checkbox"/> Self			5. Senate ID #
Association of Metropolitan Sewerage Agencies			6. House ID #
			341010

TYPE OF REPORT 8. Year 2004 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 _____ 11. No Lobbying Act

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13	
12. Lobbying Firms	13. Organizations
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activities for this reporting period were:
Less than \$10,000 <input type="checkbox"/>	Less than \$10,000 <input type="checkbox"/>
\$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ <u>15,000</u>	\$10,000 or more <input type="checkbox"/> ⇨ \$ _____
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).	14. REPORTING METHOD. Check box to indicate exp accounting method. See instructions for description of op
	<input type="checkbox"/> Method A. Reporting amounts using LDA definitions
	<input checked="" type="checkbox"/> Method B. Reporting amounts under section 6033(b) Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code

Form C

Printed Name and Title Jeffery More, Principal

Registrant Name The Accord Group, Inc. Client Name Association of Metropolitan Sewer

LOBBYING ACTIVITY. Select as many codes as necessary to reflect the general issue areas in which th engaged in lobbying on behalf of the client during the reporting period. **Using a separate page for each co** information as requested. Attach additional page(s) as needed.

15. General issue area code TAX - Taxation/Internal Revenue Code (one per page)

16. Specific lobbying issues

Add page to continue specific issues description for this issue

Funding for Water Infrastructure Trust Fund

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

House Ways & Means
Senate Finance

18. Name of each individual who acted as a lobbyist in this issue area *Add a page to continue adding lobbyists fo*

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
Jeff	More		

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

Jeffery More *2/11/05*

Add a page for a diffi

Registrant Name The Accord Group, Inc. Client Name Association of Metropolitan Sewer

Information Update Page - Complete ONLY where registration information has changed.

20. Client new address

Address

City

State

Zip Code

Country

21. Client new principal place of business (if different than line 20)

City

State

Zip Code

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

First Name

Last Name

Suffix

First Name

Last Name

1

3

2

4

ISSUE UPDATE

24. General lobbying issues that **no longer** pertain

Find the code to select below.

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal place of Business (city and state or country)
	Address C/S/Z	City State Country
	Address C/S/Z	City State

26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client

1

2

3

FOREIGN ENTITIES

27. Add the following foreign entities

Name	Street Address City	Address State/Province Country	Principal place of business (city and state or country) City State Country	Amount of contribution for lobbying activities	Other %

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

1

3

5

2

4

6

Add a page for more

Printed Name and Title Jeffery More, Principal

