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

04 APR 21 AM 8: 22

LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

	1. Effective Date of I	Registration 2/1/2004	
	Senate Identification Number		

100	***************************************	***************************************	
54115411411111111111111111111111111111	State DC	Zip 20036	
	State/Zip (or Country)		
Contact		E-mail (optional) jbaustert	
or activities			
Self		ns employing in-house lobbylsts should che	

	State MN	Zip 55415	
m line 7)	State/Zip	o (or Country)	
	Contact or activities nt parate registra Self m line 7)	Senate Identification 100 State DC In line 3) State/Zip (Contact Jami Baustert or activities Int parate registration for each client. Organization Self State MN m line 7) State/Zip	

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 pe this section has served as a "covered executive branch official" or "covered legislative branch official" within two 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 applica
Steve Whitaker	N/A
Lindsay Lawrence	N/A
Kevin Borland	N/A
	0000000110000

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Drew Cole, Jona Turner	N/A
Form LD-1 (Rev. 06/98)	

Registrant Name	DCI Group	Client Name		US Bancorp	
	SUES sue areas. Select all ap	plicable codes listed in instr	ructions and on the re	everse side of Form LD-	
BUD BAN					
12. Specific lobbying is FY '05 Treasury a		ipated) Il and issues pertaining to	o the Fair Credit Re	porting Act.	
AFFILIATED O 13. Is there an entity of a semiannual period	ther than the client th	NS nat contributes more than major part plans, superv	\$10,000 to the lob	bying activities of the registrant's lobbying	
✓ No Go to line 14.		Yes Complete the rest of this section for each enti- the criteria above, then proceed to line 14.			
Nam	e	Address		Principal Place of Bu (city and state or co	
b) directly activitic) is an af	gn entity that: least 20% equitable of or indirectly, in who es of the client or any	ownership in the client or le or in major part, plans organization identified of any organization identifi	, supervises, contro on line 13; or	ols, directs, finances o	
☑ No ⇔ Sign a	and date the registration	on.		est of this section for e iteria above, then sign	
Name	Add		incipal place of business and state or country)	Amount of contribution for lobbying activities	
			D -4-	. 03/15/20	
Signature	ng #5d4f549f-cc45-412	2c-9bab-e02d4fce601a - Pa	Date	, , , , , , , , , , , , , , , , , , , ,	

Printed Name and Title Doug Davenport, Managing Partner

Form LD-1 (Rev. 06/98)