

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
ORIGINAL

LOBBYING REPORT

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

1. Registrant Name <u>CRAIG ASSOCIATES</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>1001 Connecticut Ave, NW Suite 5</u>			
3. Principal Place of Business (if different from line 2) City: <u>Washington</u> State/Zip (or Country) <u>DC 20036</u>			
4. Contact Name <u>Patricia Craig</u>		Telephone <u>(202) 466-0001</u>	E-mail (optional)
5. Senate ID # <u>3278</u>			6. House ID # <u>32784</u>
7. Client Name <input type="checkbox"/> Self <u>County/Delaware Directors Association of California</u>			

TYPE OF REPORT 8. Year 2003 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

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: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ <u>30,000</u> <small>Income (nearest \$20,000)</small>	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 accounting method. See instructions for description of method.	
<input type="checkbox"/> Method A. Reporting amounts using LDA definition	
<input type="checkbox"/> Method B. Reporting amounts under section 6033(e) Internal Revenue Code	
<input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code	

Signature Patricia Craig 8/14/03

Printed Name and Title

RUTHIEA N. GRAY, PRESIDENT

LD-2 (REV. 6/98)

PAC

Registrant Name Craig Associates Client Name County Welfare Dept Association of C

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

15. General issue area code BUD (one per page)

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16. Specific lobbying issues

TANF Reauthorization
PSSF - Promoting Safe & Stable Families
SSBG - Social Services Block Grant
WIA - Workforce Investment Act

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

House
Senate
HHS

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

Name	Covered Official Position (if applicable)
<u>Daria Dancel</u>	
<u>Patricia Craig</u>	

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

Signature Patricia Craig Date 8/14/03

Printed Name and Title Patricia Craig, President

[Handwritten signature]

County Welfare Dept
Association of C

Registrant Name CRAIG ASSOCIATES Client Name _____

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

15. General issue area code IMM (one per page)

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16. Specific lobbying issues

TANF Reauthorization - Restoration of benefits for legal immigrants

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

House
Senate
HHS

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

Name	Covered Official Position (if applicable)
Dana Dancel	
Patricia Craig	
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.....	
.....	
.....	
.....	
.....	
.....	

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

Signature Patricia Craig Date 8/14/03

Printed Name and Title Patricia Craig, President

Registrant Name CRAIG ASSOCIATES Client Name County Welfare Association of

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

15. General issue area code WEL (one per page)

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16. Specific lobbying issues

Foster Care - licensing of relatives regulations
Foster Care - flexible funding option - HHS Polic
TANF Reauthorization
Child Care
WIA - Workforce Investment Act - mandatory in one-stop

17. House(s) of Congress and Federal agencies contacted

Check if None

House
Senate
HHS
DOL

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

Name	Covered Official Position (if applicable)
<u>Daria Daniel</u>	
<u>Patricia Craig</u>	

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature Patricia Craig Date 8/14/03

Printed Name and Title Patricia Craig, Director

~~CONFIDENTIAL~~