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SECRETARY OF THE
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LOBBYING REPORT

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

1. Registrant Name Financial Services Forum			
2. Address <input type="checkbox"/> Check if different than previously reported 1800 K Street, NW, Suite 701			
3. Principal Place of Business (if different from line 2) Washington, DC 20006 City: State/zip (or Country)			
4. Contact Name Russel Iuculano	Telephone (202) 457-8762	E-mail (optional) riuculano@dc.thesf.org	5. Senate ID # 83535-12
7. Client Name <input checked="" type="checkbox"/> Self			6. House ID # 36428000

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 Activities

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 type="checkbox"/> ⇨ \$ _____ Income (nearest \$20,000)	EXPENSES relating to lobbying activities for this report period were: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ <u>20,000.00</u> Expenses (nearest \$20,000)
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 checked="" type="checkbox"/> Method A. Reporting amounts using LDA definitio <input type="checkbox"/> Method B. Reporting amounts under section 6033(C) Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) Internal Revenue Code

Signature *Russel Luculano* Date **2/6/04**

Printed Name and Title Russel Luculano, Vice President

Signature _____ Date _____

Printed Name and Title Russel Lucifano, Vice President