

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

LOBBYING REPORT

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

1. Registrant Name <input checked="" type="checkbox"/> Organization <input type="checkbox"/> Individual							
DONALD M. NELSON, JR., LLC							
2. Address <input type="checkbox"/> Check if different than previously reported							
Address1	6329 CROOKED OAK LANE	Address2					
City	FALLS CHURCH	State	VA	Zip Code	22042	Count	
3. Principal place of business (if different than line 2)							
City		State		Zip Code		Count	
4a. Contact Name		b. Telephone Number		c. E-mail		5. Senat	
Mr. DONALD M. NELSON, JR.		(703) 533-3635		dnelsonjr@yahoo.com		311-9	
7. Client Name <input type="checkbox"/> Self						6. Hous	
ALTRIA CORPORATE SERVICES, INC.						38685	

TYPE OF REPORT 8. Year 2006 Midyear (January 1-June 30) 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	13. Organizations
INCOME relating to lobbying activities for this reporting period was:	EXPENSE 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>30,000.00</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 Check box to indicate accounting method. See instructions for description
	<input type="checkbox"/> Method A. Reporting amounts using LDA definition
	<input type="checkbox"/> Method B. Reporting amounts under section 6033(b) Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under section 162(e) Revenue Code

Signature Digitally Signed By: Donald M Nelson Jr. Date 01/06

US, DPT, Access Unaffiliated Individual, Donald M Nelson Jr.



Printed Name and Title Donald M. Nelson, Jr. President

0000011058



v5.0.0i

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

20. Client new address

Address _____

City _____ State _____ Zip Code _____ - _____ Coun

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

City _____ State _____ Zip Code _____ - _____ Coun

22. New General description of client's business or activities

LOBBYIST UPDATE

23. Name of each previously reported individual who is no longer expect 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 issue that no longer pertain

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address				Principal Place of Bu (city and state or co
	Street Address City	State/Province	Zip	Country	
					City State Country

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

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

1	3	5
2	4	6

65011000011059



v5.0.0i

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

20. Client new address

Address _____

City _____ State _____ Zip Code _____ - _____ Cour _____

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

City _____ State _____ Zip Code _____ - _____ Cour _____

22. New General description of client's business or activities

LOBBYIST UPDATE

23. Name of each previously reported individual who is no longer expect 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 issue that no longer pertain

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------	--------------------------

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address				Principal Place of Bu (city and state or co
	Street Address City	State/Province	Zip	Country	
					City State City State
					Country

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

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

1	3	5
2	4	6

0000011060



v5.0.0i