

Clerk of the House of Representatives
 Legislative Resource Center
 B-106 Cannon Building
 Washington, DC 20515

Secretary of the Senate
 Office of Public R
 232 Hart Building
 Washington, DC 20510

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 02 AUG 2004 2:44

LOBBYING REPORT

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

1. Registrant Name Powersstrategies

2. Address Check if different than previously reported
46505 Lynnhaven Square

3. Principal Place of Business (if different from line 2)
 City: Potomac Falls State/Zip (or Country) VA 20165

4. Contact Name <u>Timothy Powers</u>	Telephone <u>703-430-4211237</u>	E-mail (optional)	5. Senate <u>74</u>
7. Client Name <input type="checkbox"/> Self <u>E Bay</u>			6. House I <u>35</u>

TYPE OF REPORT 8. Year 2002 Midyear (January 1-June 30) OR Year End (July 1)

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 Lot

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

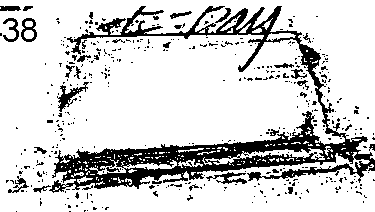
<p>12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇒ \$ <u>20,000.</u> <small>Income (nearest \$20,000)</small></p> <p>Provide a good faith estimate, 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).</p>	<p>13. Organizations</p> <p>EXPENSES relating to lobbying activities for the period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ <small>Expenses (n</small></p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA</p> <p><input type="checkbox"/> Method B. Reporting amounts under section _____ Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section _____ Internal Revenue Code</p>
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Signature _____

Printed Name and Title _____



Registrant Name Powers strategies 00020390438



LOBBYING ACTIVITY. Select as many codes as necessary to describe the client or person engaged in lobbying on behalf of the client during the reporting period. Attach additional page(s) as needed.

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

16. Specific lobbying issues

Online payment issues, database protection

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

Check if None

U.S. House of Representatives
U.S. Senate

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

Name	Covered Official Position (if applicable)
<u>Timothy Powers</u>	

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

Check if None

Signature Timothy F. Powers Date 8-14-02

Printed Name and Title Timothy F. Powers, President



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