

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
05 MAR -2 PM

LOBBYING REPORT

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

1. Registrant Name Copeland Lowery Jacquez Denton & White			
2. Registrant Address <input type="checkbox"/> Check if different than previously reported Address 525 9th Street, NW Suite 800 City Washington State/Zip (or Country) DC 20004			
3. Principal Place of Business (if different from line 2) City N/A State/Zip (or Country)			
4. Contact Name Yvette Willis			5. Senate ID # 10800-1938
Telephone 202-347-5990			E-mail (optional) ywillis@clj.com
7. Client Name <input type="checkbox"/> Self FLIR Systems, Inc.			6. House ID # 31822125

TYPE OF REPORT 8. Year 2004 Midyear (January 1-June 30) **OR** Year End (July 1-Dec

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 Lobbyi

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:	EXPENSES 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>\$60,000.00</u> Income (nearest \$20,000)	\$10,000 or more <input type="checkbox"/> >> \$ _____ 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 accounting method. See instructions for description of
	<input type="checkbox"/> Method A. Reporting amounts using LDA definiti
	<input type="checkbox"/> Method B. Reporting amounts under section 6033 the Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under section 162(Internal Revenue Code

Signature _____ Date 2/10/2020

Printed Name and Title Letitia White - Partner _____ Pag

Registrant Name: Copeland Lowery Jacquez Denton & White

Client Name: FLIR Systems, Inc.

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

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

16. Specific Lobbying issues
***, Department of Defense FY05 Appropriations,**

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

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

Name	Covered Official Position (if applicable)
LeSage, Alyssa	
White, Letitia	

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

Signature _____ Date _____

Printed Name and Title **Letitia White - Partner** _____ Pag

Registrant Name: Copeland Lowery Jacquez Denton & White

Client Name: FLIR Systems, Inc.

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

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

16. Specific Lobbying issues
 *, National Defense Authorization Act FY05,

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

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

Name	Covered Official Position (if applicable)
LeSage, Alyssa	
White, Letitia	

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

Signature 

Date **2/10/2005**

Signature [Handwritten Signature] _____ Date _____

Printed Name and Title Letitia White - Partner _____ Page _____