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 T

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LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

Check if this is an Amended Registration		1. Effective Date of Registration 2/6/2003		
2. House Identification Number		Senate Identification Number		
REGISTRANT 3. Registrant name The Cohen Group				
Address 1200 19th Street, N.W., Suite	400			
City Washington		State DC	Zip 20036	
4. Principal place of business (if different from line 3) City		State/Zip	State/Zip (or Country)	
5. Telephone number and contact name (202) 689-7900	Contact	Colette M. Walker	E-mail (optional) cmw@	
General description of registrant's business International strategic consulting	or activities	S		
CLIENT A Lobbying firm is required to file a se labeled "Self" and proceed to line 10. 7. Client name Kroll Address 900 Third Avenue	eparate registra		n ; employing in-house lobbyists should	
City New York		State NY	Y Zip 10022	
8. Principal place of business (if different fro	m line 7)	State/Zi ₁	p (or Country)	
General description of client's business or Risk mitigation company	activities			
LOBBYISTS				

10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If any this section has served as a "covered executive branch official" or "covered legislative branch official" within to acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the person served.

Name	Covered Official Position (if appl
Deborah Rosenblum	
James Bodner	
Doug Wilson	

Mara Rudman

H.K. Park Form LD-I (Rev. 06/98)

Legistrant NameThe C	Cohen Group	Client Name		Kroll
LOBBYING ISSUES 11. General lobbying issue area	s. Select all appl	icable codes listed in in	structions and on th	he reverse side of Form LD
HOM				. <u>-</u>
12. Specific lobbying issues (co	arrent and anticip	ated)	*	
U.S. emergency manage Protective security in the Port and maritime securi	U.S. and abroa	ad	rcising;	
AFFILIATED ORGA 13. Is there an entity other th a semiannual period and	an the client tha in whole or in t	t contributes more th najor part plans, supe	rvises or controls	lobbying activities of the registrant's lobbying this section for each entite
✓ No ⇔ Go to line ?	14.		•	nen proceed to line 14.
Name		Address		Principal Place of Bu (city and state or co
FOREIGN ENTITIE 14. Is there any foreign entity				
b) directly or indectivities of the	irectly, in whole te client or any of the client or a	e or in major part, pla organization identifie	ns, supervises, co d on line 13; or	ion identified on line 13; ontrols, directs, finances of and has a direct interest in
No ⇒ Sign and date	e the registration	n. 🔾 Y	•	ne rest of this section for ne criteria above, then sig i.
Name	Addı		Principal place of business y and state or coun	Amount of contribution for lobbying activities
Signature/Itara Ru	dura_			Date_ 2-14-03

Form LD-1 (Rev. 06/98)