

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
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LOBBYING REPORT

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

1. Registrant name				
Organization <u>CAPITOL CONSULTANTS LLC</u>				
2. Address <input type="checkbox"/> Check if different than previously reported				
Address 1 <u>1020 SALAMANCA N.W.</u>				
City	State	Zip Code	Country US	
<u>ALBUQUERQUE</u>	<u>NM</u>	<u>87107</u>		
3. Principal place of business (if different than line 2)				
City	State	Zip Code	Country	
	State/Zip or Country			
4a. Contact Name		b. Telephone number	c. E-mail	5. Senate ID #
Prefix	Full Name			
	<u>Mr. JOHN RYAN</u>	<u>505-343-1400</u>	<u>JOHNCHRISRYAN</u>	<u>89895-</u>
7. Client Name				6. House ID #
<input checked="" type="checkbox"/> Self		<u>@YANCO.COM</u>		<u>367160</u>

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

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 Acti

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13	
<p align="center">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 type="checkbox"/> ⇔ \$ <u>36,000</u></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 align="center">13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇔ \$ _____</p> <p>14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of opti</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitions or</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8), Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of t Revenue Code</p>

Form Co

Printed Name and Title JOHN RYAN, OWNER

0000450234

Registrant Name CAPITOL CONSULTANTS LLC Client Name NATIONAL RURAL ELECTRIC

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

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

16. Specific lobbying issues

ELECTRICITY PROVISIONS OF ENERGY BILL
TAX PROVISIONS OF ENERGY BILL

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

U.S. SENATE
U.S. HOUSE OF REPRESENTATIVES
WHITE HOUSE

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

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
JOHN	RYAN		

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

Printed Name and Title JOHN RYAN, OWNER

0000450235

Registrant Name CAPITOL CONSULTANTS LLC Client Name NAT'L RURAL ELECTRIC

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

20. Client new address

Address

City

State

Zip Code

Country

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

City

State

Zip Code

Country

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

LOBBYIST UPDATE

23. Name of each previously reported individual who is no longer expected to act as a lobbyist for the client

First Name

Last Name

Suffix

First Name

1

3

2

4

ISSUE UPDATE

24. General lobbying issues that no longer pertain

Find the code to select below.

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal place of Business (city and state or country)
	Address	City
	C/S/Z	State Country
	Address	City
	C/S/Z	State

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

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

1

3

5

2

4

6

Printed Name and Title

JOHN RYAN, OWNER

LD-2DS (RM/03)

John Ryan

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