

CRAIG ASSOCIATES · GOVERNMENT RELATIONS
1001 Connecticut Avenue, N.W. · Suite 507 · Washington, DC · 20036 · 202-466-0001 fax 202-466-0002

PATRICIA J. CRAIG, President
e-mail: pcraig@bellatlantic.net

April 24, 2001

To: The Office of the Clerk, U.S. House of Representatives
From: Craig Associates
Re: Filing Delay

Due to conflicting information we received from varying sources, we inadvertently sent an end of year report and did not include the LD2 forms. We regret any inconvenience this delay has caused your office. Thank you.

Clerk of the House of Representatives
 Legislative Resource Center
 8-106 Cannon Building
 Washington, DC 20515

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

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 PUBLIC RECORDS

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LOBBYING REPORT

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

1. Registrant Name CRAIG ASSOCIATES, Patricia J. Craig			
2. Address <input type="checkbox"/> Check if different than previously reported 1001 CONNECTICUT AVE, NW SUITE 507			
3. Principal Place of Business (if different from line 2) City: Washington State/Zip (or Country) DC 20036			
4. Contact Name Patricia J. Craig		Telephone 202 462-0001	5. Senate ID # 32784000
7. Client Name <input type="checkbox"/> Self Comty Nrljarc Directors Association		6. House ID # 32784000	

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

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"/> ⇒ \$ 25,050 <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 this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ <small>Expenses (nearest \$20,000)</small></p> <p>14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definitions only</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6013(b)(8) of the Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code</p>

Signature Patricia J. Craig PATRICIA J CRAIG
 Printed Name and Title President CRAIG ASSOCIATES

Registrant Name Patricia Craig Client Name County Welfare Directors Assn

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 WEL (one per page)

16. Specific lobbying issues
Welfare, Adoption, Foster Care, Social Services Block Grant, Food Stamps

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

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

Name	Covered Official Position (if applicable)	New
<u>Kathryn Dylak</u>		<input type="checkbox"/>
<u>Patricia Craig</u>		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature Patricia Craig Date 4/24/01
Printed Name and Title President - Patricia J. Craig

Registrant Name PATRICIA CRAIG Client Name COUNTY WELFARE DIRECTORS ASSN

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

20. Client new address

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

City

State/Zip (or 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

Kathryn Dyjak

ISSUE UPDATE

24. General lobbying issues previously reported that no longer pertain

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Business (city and state or country)

26. Name of each previously reported organization that is no longer affiliated with the registrant or client

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	Ownership percentage in client

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

Signature *Patricia Craig* Date 4/24/01
Printed Name and Title PRESIDENT - PATRICIA J. CRAIG