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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

## **LOBBYING REPORT**

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

1. Registrunt name				
Organization Fierce,	Isakowitz & Blaiock			
2. Address Check if c	different than previously reported	***************************************		
Address1 600 New Hampsh	ire Ave., NW		Suite 1000	
City Washington	Sta	te DC	Zip Code 20037	Country <b>US</b>
3. Principal place of business (if differ	ent than line 2)		•••••••••••••••••••••••••••••••••••••••	
City City	e	te Z tate/Zip or Country	Zip Code	Country
4a. Contact Name Prefix Full Name	b. Telephone number	c. E-1	nail	5. Senate ID#
Mr. Mark Isakowitz	(202) 333-8667	misakowitz@fiero	e-isakowitz.com	44812-41
7. Client Name Self Fannie Mae				6. House 1D# 3150702
INCOME OR EXPENSES 12. Lobbyin	***************************************	ne 12 OR Line I		izations
12. Lobbyin  INCOME relating to lobbying activiti		13. Organizations		
wus:	were:	EXPENSES relating to lobbying activities for this reporting were:		
Less than \$10,000	Less than \$10	Less than \$10,000		
\$10,000 or more 🗵 🖒 \$	40,000	\$10,000 or mo	ore <b>□</b> ⇒ \$	
Provide a good faith estimate, roun of all lobbying related income from	14. REPORT accounting me	ING METHOD. Che ethod. See instructions	ck box to indicate expers for description of option	
payments to the registrant by any o activities on behalf of the client).		Method	A. Reporting amount	s using LDA definitions on
, , , , , , , , , , , , , , , , , , ,		Method	Internal Revenue (	s under section 6033(b)(8) Dode
		Method	, -	s under section 162(e) of th
			Revenue Code	

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Registrant Name Fierce, Isakowitz & Blalock		owitz & Blalock	Client Name Fannie Mae		
engaged in lobb	oying on beha	Select as many co alf of the client duri ttach additional pa	odes as necessary to reflect the general issue areas in which the ing the reporting period. Using a separate page for each coduge(s) as needed.		
15. General issu	ue area code	HOU - Housing	(one per page)		
16. Specific lob	bying issues		Add page to continue spacific resules description for this issu-		
Home Owne GSE Reform			2 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1		
17. House(s) of	Congress and	d Federal agencies	contacted Check if None		
U.S. House U.S. Senate White House Dept. of Trea	•	itives			
18. Name of eac	Name		by ist in this issue area  Add a page to common additing robby interior in  Covered Official Position (if applicable)		
Mark	Isakowitz				
Kirk	Blalock	***************************************	Spec aget to he hes in		
Don	Fierce		ap in room was an		
Katie	Huffard				
Kirsten	Chadwick		Spec Asslatable Pres		
Diane	Moery	•••••••••••••••••••••••••••••••••••••••	for we sprais		
Samantha	Poole				
Kate	Hull		La Harningas		
Mike	Chappeli		Dep COS Pickers		
19. Interest of ea	ich foreign er	itity in the specific	issues listed on line 16 above Check if None		

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Printed Name and Title Mark Isakowitz, President

Add a puge for a uiders.

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<b>(3)</b>

Information Ur	ce, Isakowitz (		Client Name Fanni		
20. Client new addre	ss	- Complete ONL	Y where registration in:	formation has changed.	
Address		:		·	
City			State Zin C	,	
21. Client new princ	ipal place of bu	ısiness (if different thar		ode Country	
City					
22. New general des	cription of clier	nt's business or activitie	p	de Country	
LOBBYIST UPD	ATE	•			
		orted individual who	is <b>no longer</b> expected to a	ct as a lobbyist for the client	
Diane	Last Nar Moerv	me Suffix	First Name	Last Name	
2	Woory		<u>3</u>		
ك			4		
ISSUE UPDATE					
24. General lobbyin	g issues that n	io longer pertain	Find the code	to select below.	
	•				
A PRINTE I ACCRECATION OF					
AFFILIATED OF 25. Add the following					
Nam		ganization(s)	A 2 5		
		Address		Principal place of Busine (city and state or count	
	4	Address		City	
		C/S/Z		State Country	
	ŝ	Address C/S/Z		City	
26. Name of each pr	eviously reno	eted organization tha	t is <b>no longer</b> affiliated wit	State	
]	orionally repor			•	
-		[4]	3	J	
FOREIGN ENTIT		•		<u>, , , , , , , , , , , , , , , , , , , </u>	
27. Add the followin	g toreign entit	Address	T D		
MERIT	Street Address City	State/Province Countr	Principal place of business (city and state or country)	Amount of contribution Own for lobbying activities percent	
PARITO		Santa Andrews County		clier	
Medite		, ,	City		
PRESE					
			State Country		
28. Name of each prev	iously reported	foreign entity that no I		s affiliated with the registrant.	
	iously reported	foreign entity that no l	longer owns, or controls, or i		
28. Name of each prev	iously reported on	foreign entity that no l	longer owns, or controls, or i	3	
28. Name of each prev	iously reported on	foreign entity that no l	longer owns, or controls, or i	5	
28. Name of each prev	iously reported on	foreign entity that no l	longer owns, or controls, or i	3	

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