

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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SECRETARY  
04 MAR 17

## LOBBYING REPORT

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

1. Registrant Name JJEFERSON CONSULTING GROUP, LLCLC			
2. Address <input type="checkbox"/> Check if different than previously reported 1401 K STREET, NW; STE. 900			
3. Principal Place of Business (if different from line 2) WASHINGTON DC 20005 City: State/zip (or Country)			
4. Contact Name	Telephone	E-mail (optional)	5. Senate ID #
LISA GARGANO	(202) 626-8228		48782-354
7. Client Name <input type="checkbox"/> Self LEXIS NEXIS			6. House ID # 34504032

**TYPE OF REPORT** 8. Year 2003 Midyear (January 1-June 30)  OR Year End (July 1-Decer

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

### INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

12. Lobbying Firms	13. Organizations
<p><b>INCOME</b> 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"/> ⇔ \$ <u>80,000.00</u> Income (nearest \$20,000)</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><b>EXPENSES</b> 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"/> ⇔ \$ _____ Expenses (nearest \$20,000)</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate exp accounting method. See instructions for description of opt</p> <p><input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definition</p> <p><input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033(t) Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(e) Internal Revenue Code</p>

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name and Title \_\_\_\_\_  
LISA GARGANO, HUMAN RESOURCES/ADMINISTRATION

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Registrant Name EFFERSON CONSULTING GROUP, LL Client Name LEXIS NEXIS

**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 code** information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

IDENTITY AUTHENTICATION  
HOMELAND SECURITY ISSUES  
S994  
S1049  
S1043  
HR 2555  
HR 2115  
S1618

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

[Empty box for listing House(s) of Congress and Federal agencies contacted]

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

Name	Covered Official Position (if applicable)
PETER KANT	
ROBERT THOMPSON	
JENNIFER KERBER	
ANGELA MCNAMARA	
JULIE SUSMAN	

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

Signature *Bal. Argano* Date 02/16/2004

Printed Name and Title LISA GARGANO, HUMAN RESOURCES/ADMINISTRATION

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Registrant Name EFFERSON CONSULTING GROUP, LL Client Name LEXIS NEXIS

**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

ROSALYN MILLMAN

**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 Bus (city and state or coun

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

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

Signature *Erin J. [Signature]* Date 02/13/2004

Printed Name and Title LISA GARGAO, HUMAN RESOURCES/ADMINISTRATION

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