

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 OF THE SENATE

03 JUL 23 PM 2:00

LOBBYING REPORT

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

1. Registrant Name <u>WASHINGTON OFFICE ON AFRICA</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>212 EAST CAPITOL ST., WASHINGTON, DC 20007</u>			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name <u>LEON P. SPENCER</u>	Telephone <u>202 547-7503</u>	E-mail (optional) <u>wor@igc.org</u>	5. Senate ID # <u>00006</u>
7. Client Name <input checked="" type="checkbox"/> Self			6. House ID # <u>30624</u>

TYPE OF REPORT 8. Year 2003 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 Activities

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"/> ⇒ \$ _____ 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 align="center">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 checked="" type="checkbox"/> ⇒ \$ <u>40,000</u> Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of methods.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input checked="" type="checkbox"/> Method B. Reporting amounts under section 60 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 16 Internal Revenue Code</p>

Signature _____

Printed Name and Title LEON P. SPENCER, EXECUTIVE DIRECTOR

LD-2 (REV 6/98)

Registrant Name WASHINGTON OFFICE ON APRWA Client Name SELF

00000231422

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

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

16. Specific lobbying issues

HIV/AIDS (global)
Development assistance
Landmines
Child soldiers
Sudan

17. House(s) of Congress and Federal agencies contacted

Check if None

House
Senate
Dept of State

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

Name	Covered Official Position (if applicable)
<u>LEON P. SPENCER</u>	
<u>SYLVIA STERN</u>	
<u>LIA TESTA</u>	

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature _____ Date _____

Printed Name and Title LEON P. SPENCER, EXECUTIVE DIRECTOR

Form LD-2 (Rev 6/98)

Registrant Name WASHINGTON OFFICE ON AFRICA Client Name SELF

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

0
1
2
3
4
5
6
7
8
9

LOBBYIST UPDATE

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

SYLVIA STERN

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 E (city and state or c

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

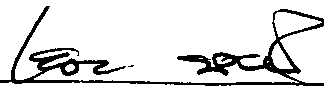
FOREIGN ENTITIES

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 regist affiliated organization

Signature



Date

7-23-03

Printed Name and Title

LEON P. SPENCER

EXECUTIVE DIRECTOR

Form 1042 (Rev. 1/98)