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LOBBYING REPORT

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


1. Registrant Name DAVIS O'CONNELL, INC.			
2. Address <input type="checkbox"/> Check if different than previously reported 444 N. CAPITOL ST., SUITE 841			
3. Principal Place of Business (if different from line 2) City: WASHINGTON State/Zip (or Country): DC 20001			
4. Contact Name LYNDA DAVIS	Telephone (202) 638-5333	E-mail (optional) ldavis@davisconnell.com	5. Senate ID # 117058-315
7. Client Name <input type="checkbox"/> Self WASHINGTON + JEFFERSON			6. House ID # 31124-024

TYPE OF REPORT 8. Year **2000** 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"/> ⇒ \$ 50,000 <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 6033(b)(3) of the Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code</p>
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Signature: *Lynda C. Davis* 

Printed Name and Title: **LYNDA C. DAVIS, PRESIDENT**

Registrant Name DAVIS O'CONNELL Client Name W + J

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 EDU (one per page)

16. Specific lobbying issues

TEACHER PROFESSIONAL DEVELOPMENT FUNDING
THROUGH U.S. DEPT. OF EDUCATION - H.R. 4577/S. 255

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

HOUSE OF REPS.
SENATE

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

Name	Covered Official Position (if applicable)	New
<u>LYNDA DAVIS</u>	<u>PRESIDENT</u>	<input type="checkbox"/>
<u>TERRY O'CONNELL</u>	<u>COO</u>	<input type="checkbox"/>
<u>JENNIFER GOLDEN</u>	<u>COUNSEL</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



Lynda C. Davis

Date 2/7/01

Printed Name and Title LYNDA C. DAVIS, PRESIDENT

Registrant Name DAVIS O'CONNELL Client Name W + J

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 ECN (one per page)

16. Specific lobbying issues

COMMUNITY ECONOMIC DEVELOPMENT

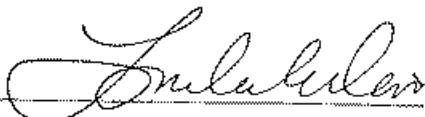
17. House(s) of Congress and Federal agencies contacted Check if None

HOUSE OF REP.
SENATE

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

Name	Covered Official Position (if applicable)	Yes
<u>LYNDA DAVIS</u>	<u>PRESIDENT</u>	<input type="checkbox"/>
		<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  Date 2/7/01
Printed Name and Title LYNDA C. DAVIS, PRESIDENT