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## LOBBYING REPORT

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

1. Registrant Name <u>JOHN RYAN</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>1020 SALAMANCA NW</u>			
3. Principal Place of Business (if different from line 2) City: <u>ALBUQUERQUE</u> State/Zip (or Country) <u>NEW MEXICO 87</u>			
4. Contact Name	Telephone	E-mail (optional)	5. Senate ID #
<u>JOHN RYAN</u>	<u>505-238-3733</u>		<u>89895</u>
7. Client Name <input checked="" type="checkbox"/> Self			6. House ID #
			<u>36716</u>

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

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 type="checkbox"/> ⇨ \$ <u>30,000</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 checked="" 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 accounting method. See instructions for description of method.</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input 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 John Ryan

Printed Name and Title JOHN RYAN

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Registrant Name \_\_\_\_\_ Client Name \_\_\_\_\_

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the registrant is 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 ENG (one per page)

16. Specific lobbying issues

ENERGY BILL

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

SENATE  
HOUSE OF REPRESENTATIVES  
WHITE HOUSE

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

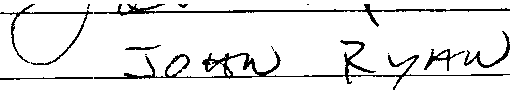
Name	Covered Official Position (if applicable)
<u>JOHN RYAN</u>	

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

Signature [Signature] Date 2/12/06

Signature \_\_\_\_\_

Printed Name and Title \_\_\_\_\_

Handwritten signature of Joan Ryan in black ink, written over a horizontal line.

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Page

Registrant Name JOHN RYAN Client Name NAT'L RURAL ELECTRIC

**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

**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 Bu (city and state or co

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 or affiliated organization

Signature John Ryan Date 2/12/0

Printed Name and Title JOHN RYAN

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