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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>Raben Group LLC</u>			
2. Address <input checked="" type="checkbox"/> Check if different than previously reported <u>213 E ST NE DC</u>			
3. Principal Place of Business (if different from line 2) City: <u>DC</u> State/Zip (or Country) <u>20002</u>			
4. Contact Name <u>Robert Raben</u>		Telephone <u>543 0005</u>	E-mail (optional)
7. Client Name <input type="checkbox"/> Self <u>Trawlers' Survival Fund</u>			5. Senate ID: <u>6145</u>
			6. House ID #

TYPE OF REPORT 8. Year 2002 Midyear (January 1-June 30) OR Year End (July 1-D

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 Lobbyi

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 type="checkbox"/> ⇒ \$ <u>40,000</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>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"/> ⇒ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6013 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code</p>
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Signature

Robert Raben

Printed Name and Title Walter K. Kelly President

LD-2 (REV. 6/98)

Registrant Name _____ Client Name _____

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 cot information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

GROUND FISH ISSUES

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

HOUSE
SENATE

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

Name	Covered Official Position (if applicable)
<u>Robert Raben</u>	<u>Asst Atty Gen, OLA, DOJ</u>
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19. Interest of each foreign entity in the specific issues listed on line 16 above Check if None

Signature Robert Raben Date 8/14/02

Printed Name and Title Robert Raben, PRESIDENT

