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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

SECRETARY

06 FEB 2

LOBBYING REPORT

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

1. Registrant name				
Organization The Advocacy Group				
2. Address Check if different than previously reported				
Address1 1350 I Street, NW	Suite 680			
City Washington Sta	ate DC zip Code 20005 Country USA			
3. Principal place of business (if different than line 2)				
- C	ate Zip Code Country State/Zip or Country			
4a. Contact Name b. Telephone number Prefix Full Name	c. E-mail 5. Senate ID#			
Mr. George A. Ramona 202-393-4841	Carolined@advocacy.com 261-696			
7. Client Name Self Long Island University	6. House ID# 30018064			
10. Check if this is a Termination Report ☐ ⇒ Termination INCOME OR EXPENSES - Complete Either Li				
***************************************	ne 12 OR Line 13			
12. Lobbying Firms	13. Organizations			
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activities for this reporting p were:			
Less than \$10,000	Less than \$10,000			
\$10,000 or more 🗵 🖒 \$	\$10,000 or more			
Provide a good faith estimate, rounded to the nearest \$20,000 of all lobbying related income from the client (including all	14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options			
payments to the registrant by any other entity for lobbying activities on behalf of the client).	Method A. Reporting amounts using LDA definitions only Method B. Reporting amounts under section 6033(b)(8) of Internal Revenue Code			
	Method C. Reporting amounts under section 162(e) of the Revenue Code			
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Registrant Name	The Advocacy Group		Client Name Long Island University			
engaged in lobb		client during the	necessary to reflect the general issue areas in which the reporting period. Using a separate page for each code, as needed.			
15. General issu	ie area code	ducation	(one per page)			
16. Specific lob	bying issues		Add page to continue specific issues description for this issue >			
HR 2528 MI HR 3010 - L HR 2360- Ho HR 3058 Tra		eran's Affairs App Appropriations ropriations , Houseing and l				
17. House(s) of	Congress and Federa	l agencies conta	cted Check if None			
US House of I	Representatives	·				
US Senate						
18 Name of eac	ch individual who act	ed as a lobbyist	in this issue area			
10. Pullio of out	Name	od us a toooy ist	In this issue area Add a page to continue additing lobbyists for this Covered Official Position (if applicable)			
First Name	Last Name	Suffix	(application			
Robert J.	Dotchin	Mr.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Suzy	Glucksman	Ms.				
George A.	Ramonas	Mr.				
1**************************************						
***************************************	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
***************************************	***************************************	***************************************				
	***************************************	***************************************				
10.1	1.6					
19. Interest of e	ach toreign entity in t	the specific issue	es listed on line 16 above Check if None			

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Registrant NameThe Advocacy Group			Client Name Long Island University				
Information Update Page	- Complete ONLY w	here regi	stration info	rmation has chan	ged.		
20. Client new address	-						
Address							
		State	Zip Code	Cor	untry		
21. Client new principal place of bu	siness (if different than line	e 20)					
City	,	State Zip Co		Country			
22. New general description of clien	nt's business or activities						
LOBBYIST UPDATE 23. Name of each previously rep First Name Last No.		10 longer	expected to act	as a lobbyist for the	client		
1		3					
2		4					
₽							
ISSUE UPDATE		F	ind the code to	select below.			
24. General lobbying issues that	no longer pertain						
					 		
AFFILIATED ORGANIZAT	ΓIONS						
25. Add the following affiliated of	organization(s)						
Name	F	Address			Principal place of Business (city and state or country)		

	Address C/S/Z			City State C	Country		
	Address			City	,		
	C/S/Z		ı	State	•		
26. Name of each previously rep	orted organization that is	no longe	r affiliated with	the registrant or cli	ent		
	[2]	3	3				
			ي ا				
FOREIGN ENTITIES							
27. Add the following foreign en	HHES Address	Principal	place of business	Amount of contribution	n Owner		
Street Addre	ess State/Province Country	_	state or country)	for lobbying activitie	s percen		
	siaterrovince Country.				client		
		City					
		State	Country				
28. Name of each previously reporte affiliated organization	ed foreign entity that no lo	nger owns,	<u>or</u> controls, <u>or</u> i	s affiliated with the re	gistrant, cli		
1	3			5			
2	4		[6			
				Add a page	for more upo		
			Mh				
Printed Name and Title Caroline	e de Munnick, Manag	er /	Vale 1	4			

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