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



## **LOBBYING REPORT**

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

	<u>.                                    </u>		
1. Registrant Name			
Smith Alling Lane	~~~~~	***************************************	
2. Address	n previously reported		
701 Pennsylvania Ave., NW	, Suite 675		
3. Principal Place of Business (if different	t from line 2)	***************************************	
City: Washington		Cip (or Country) DC 20004	
4. Contact Name	Telephone	E-mail (optional)	5. Senate ID #
Tim Schellberg	(253) 627-1091	tims@smithallinglane.com	54
7. Client Name  Self	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************	6. House ID#
Prepared Response			350
. Check if this filing amends a pro	Report □ ⇒ Termination	Date1 Line 12 OR Line 13	1. No Lobbyi
O. Check if this filing amends a pro-	Report □ ⇒ Termination  SES - Complete Either	Date1 Line 12 OR Line 13	1. No Lobbyi
O. Check if this filing amends a pro O. Check if this is a Termination	Report □ ⇒ Termination  SES - Complete Either  ng Firms	Date1 Line 12 OR Line 13	1. No Lobbyi
O. Check if this filing amends a pro- O. Check if this is a Termination  INCOME OR EXPEN  12. Lobbyin  INCOME relating to lobbying ac period was:	Report □ ⇒ Termination  SES - Complete Either  ng Firms	Date 12 OR Line 13  13. Organizate EXPENSES relating to lobbying active	1. No Lobbyi
O. Check if this filing amends a property of the control of the co	Report □ ⇒ Termination  SES - Complete Either  ng Firms  ctivities for this reporting	Date 1  Line 12 OR Line 13  13. Organizate   EXPENSES relating to lobbying active period were:  Less than \$10,000   \$10,000 or more   \$\square\$ \$\square\$	1. No Lobbyi tions
O. Check if this filing amends a property of the complex of the co	Report □ ⇒ Termination  SES - Complete Either  ng Firms  ctivities for this reporting  \$20,000.00	Date1  Line 12 OR Line 13  13. Organizate  EXPENSES relating to lobbying active period were:  Less than \$10,000	1. No Lobbyi  tions  rities for this r
O. Check if this filing amends a property of the content of the co	Report □ ⇒ Termination  SES - Complete Either  ng Firms  ctivities for this reporting  \$20,000.00  Income (nearest \$20,000)	Date 1  Line 12 OR Line 13  13. Organizate   EXPENSES relating to lobbying active period were:  Less than \$10,000   \$10,000 or more   \$\square\$ \$\square\$	1. No Lobbyi  tions  ities for this r
2. Check if this filing amends a process.  10. Check if this is a Termination  INCOME OR EXPEN  12. Lobbying  INCOME relating to lobbying accepted was:  Less than \$10,000  \$10,000 or more \$\overline{\Omega} \to \$\square\$_\text{\text{Comparison}}\$  Provide a good faith estimate, rou of all lobbying related income for the stimate of the	Report	Date 1  Line 12 OR Line 13  13. Organizate   EXPENSES relating to lobbying active period were:  Less than \$10,000   \$10,000 or more   Expense   Expense   Expense   14. REPORTING METHOD. Check	1. No Lobbyi  tions  ities for this reses (nearest \$2 k box to indicor description
12. Lobbying ac period was:  Less than \$10,000  \$10,000 or more \$\infty\$ \$\square\$ \$\square\$  Provide a good faith estimate, rou	Report  Termination  SES - Complete Either  ring Firms  ctivities for this reporting  \$20,000.00  Income (nearest \$20,000)  Inded to the nearest \$20,000, from the client (including all my other entity for lobbying	Date 1  Line 12 OR Line 13  13. Organizate   EXPENSES relating to lobbying active period were:  Less than \$10,000   \$10,000 or more   Expense   Expense    14. REPORTING METHOD. Check accounting method. See instructions for	1. No Lobbyi  tions  rities for this re  ses (nearest \$2 k box to indicor description ing LDA definder section 6

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	<i>( /</i>	·	
Printed Name and Title		Tim Schellberg, Government Affairs Consultant	

LD-2 (REV. 6/98)

## 00000670992

Registrant Name	Smith Alling Lane	Client Name	Prepared Response
engaged in lobbying	VITY. Select as many coo on behalf of the client dur ested. Attach additional pa	ing the reporting period.	t the general issue areas in which the Using a separate page for each cod
15. General issue ar	ea code BUD (on	e per page)	
16. Specific lobbyin		Office of Justice Programs	s funding for building mapping program.
17. House(s) of Co	ngress and Federal agencie	s contacted $\Box$	Check if None
	Representatives ndividual who acted as a le	obbyist in this issue area	
	Nam <del>e</del>		Covered Official Position (if applicable)
Tim Schellberg			
***************************************			
***************************************			
19. Interest of each	foreign entity in the specific i	ssues listed on line 16 abov	e Check if None
Signature /	Molhely	ř	Date Fly /UI

Filing #928a1228-208b-464e-babd-b49251fb7daf - Page 3 of 6

Printed Name and Title	Tim Schellberg, Government Affairs Consultant	
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Form LD-2 (Rev.6/98)

## 00000670993

Registrant Name	Smith Alling Lane	Client Name	Prepared Response
	late Page - Complete Of		information has changed.
20. Client new address			
21. Client new principal p	place of business (if different from l	line 20)	
City		State/Zip (or Country)	
22. New general descript	tion of client's business or activities	\$	
LOBBYIST UPDA 23. Name of each pr		who is <b>no longer</b> expect	ed to act as a lobbyist for the client
ISSUE UPDATE 24. General lobbyin	g issues previously reported	that no longer pertain	
AFFILIATED OR 25. Add the following	GANIZATIONS ng affiliated organization(s)		
Na	ame	Address	Principal Place of B (city and state or c
26. Name of each p	reviously reported organizat	ion that is <b>no longer</b> affil	iated with the registrant or client
26. Name of each p  FOREIGN ENTIT  27. Add the following	IES	ion that is <b>no longer a</b> ffil	iated with the registrant or client
FOREIGN ENTIT	IES	ss Princi	iated with the registrant or client  pal place of business and state or country)  Amount of contribution for lobbying activities
FOREIGN ENTITE 27. Add the following	IES ng foreign entities	ss Princi	pal place of business Amount of contribution

28. Name of each previously reported foreign entity that no longer owns, or controls, or is affiliated with the registr affiliated organization

Signature

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Date 7/4/01/

Printed Name and Title	Tim Schellberg, Government Affairs Consultant	
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