Clerk of the House of Representatives Secretary of the Senate Legislative Resource Center B-106 Cannon Building Washington, DC 20515

Office of Public Records 232 Hart Building Washington, DC 20510

SECRETARY OF THE 05 FEB I AM

## LOBBYING REPORT

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

Registrant Name Wheat Government Relations		
William Colonia and Colonia an		99 garan biri versani di kacamatak
Address Check if different than previously reported  1201 South Eads Street Suite Two  Principal Place of Business (if different from line 2)		······································
City: Arlington State/Zi	p (or Country) VA 22202	
3. Contact Name Telephone	E-mail (optional)	5. Senate ID#
Alan Wheat (703) 271-8770	awheat@wheatgr.com	4719
7. Client Name		343
0. Check if this is a Termination Report □ ⇒ Termination  INCOME OR EXPENSES - Complete Either		11. No Lobbyii
12. Lobbying Firms	13. Organiz	itions
INCOME relating to lobbying activities for this reporting period was:  Less than \$10,000  \$10,000 or more \$\frac{3}{2} \infty \frac{\$40,000.00}{\text{lncome} (nearest \$20,000)}\$  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).	14. REPORTING METHOD. Che accounting method. See instructions  [] Method A. Reporting amounts to	enses (nearest \$20 ck box to indic for description using LDA defi under section 6 ode
240	Internal Revenue C	

Registrant Name	Wheat Government Relations	Client Name	American Association of Colleges of Nursing
engaged in lobby	TIVITY. Select as many codes ing on behalf of the client during quested. Attach additional page	the reporting per	effect the general issue areas in which the r riod. Using a separate page for each code
15. General issue	e area code BUD (one p	er page)	
2005 S. 2810 Depa 2005	partments of Labor, Health and Huma		lucation, and Related Agencies Appropriations A cation, and Related Agencies Appropriations Act
17 House(s) of	Congress and Federal agencies o	eontacted	☐ Check if None
Senate Department	epresentatives  of Health and Human Services  ch individual who acted as a lobl	ovist in this issue	area
to. Maile of car		1	
Alan Wheat	Name		Covered Official Position (if applicable)
Julie Shroyer		***************************************	
MaryAnne Sapi	0		
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404* <del>  </del>			
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***************************************		************************	**************************************
19. Interest of ea	ach foreign entity in the specific issu	ues listed on line 16	above
	12VD		
Signature	your		Date
Printed Name an	d Title Alan Wheat, President		

Form LD-2 (Rev.6/98) Page