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LOBBYING REPORT

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

1. Registrant Name <i>Associated Wire Rope Fabricators</i>			
2. Address <input type="checkbox"/> Check if different than previously reported <i>201 West Fifth Street, Ste. 501 Tulsa, OK 7410</i>			
3. Principal Place of Business (if different from line 2) City: <i>Novi</i> State/Zip (or Country) <i>Michigan 483</i>			
4. Contact Name <i>J. Barry Epperson</i>		Telephone <i>(918) 585-5641</i>	E-mail (optional)
7. Client Name <input checked="" type="checkbox"/> Self			5. Senate ID # <i>4835</i>
			6. House ID # <i>3152</i>

TYPE OF REPORT 8. Year 2005 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
INCOME relating to lobbying activities for this reporting period was:	EXPENSES relating to lobbying activities for this reporting period were:
Less than \$10,000 <input type="checkbox"/>	Less than \$10,000 <input checked="" type="checkbox"/>
\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Income (nearest \$20,000)	\$10,000 or more <input type="checkbox"/> ⇒ \$ _____ Expenses (nearest \$)
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. Check box to indicate accounting method. See instructions for description of
	<input type="checkbox"/> Method A. Reporting amounts using LDA definit
	<input type="checkbox"/> Method B. Reporting amounts under section 603. Internal Revenue Code
	<input type="checkbox"/> Method C. Reporting amounts under section 162. Internal Revenue Code

0000423419

Signature _____

Printed Name and Title _____

LD-2 (REV. 6/98)

Registrant Name Associated Wire Rope Fabricators Client Name Self

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 code** information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

Ergonomics
OSHA Slings Safety Standard
Swager Guarding (OSHA)
OSHA Appellate Reform

17. House(s) of Congress and Federal agencies contacted

Check if None

House
Senate
OSHA
OMB

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

Name	Covered Official Position (if applicable)
J. Barry Epperson	General Counsel & Chairman of Government Affairs Committee (GA)

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature _____

Date _____

0000423420



Printed Name and Title J. Barry Epperson, General Counsel

Form LD-2 (Rev. 6/98)

Page 1

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 and provide the information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

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

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

Name	Covered Official Position (if applicable)
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.....
.....

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

Signature J. Barry Epperson Date August 11, 2011

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Printed Name and Title General Counsel

Form LD-2 (Rev.6/98)

Page _____