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## LOBBYING REPORT

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

|                                                                                                                                            |  |                                  |                                               |
|--------------------------------------------------------------------------------------------------------------------------------------------|--|----------------------------------|-----------------------------------------------|
| 1. Registrant Name<br><i>RUSS REID CO.</i>                                                                                                 |  |                                  |                                               |
| 2. Address <input type="checkbox"/> Check if different than previously reported<br><i>1300 I STREET, NW SUITE 250 WASHINGTON, DC 20005</i> |  |                                  |                                               |
| 3. Principal Place of Business (if different from line 2)<br>City: _____ State/Zip (or Country): _____                                     |  |                                  |                                               |
| 4. Contact Name<br><i>MARK D. MCINTYRE</i>                                                                                                 |  | Telephone<br><i>802-371-9580</i> | E-mail (optional)<br><i>RRCJOVITA@AOL.COM</i> |
| 5. Senate ID #                                                                                                                             |  | 6. House ID #                    |                                               |
| 7. Client Name <input type="checkbox"/> Self<br><i>GOSPEL RESCUE MINISTRIES OF WASHINGTON, DC</i>                                          |  |                                  |                                               |

TYPE OF REPORT 8. Year \_\_\_\_\_ Midyear (January 1-June 30)  OR Year End (July 1-December 31)

9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report  Termination Date *1-01-01*

11. No Lobbying Activity

### 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 type="checkbox"/>                                                                         |
| \$10,000 or more <input checked="" type="checkbox"/> ⇒ \$ _____<br>Income (nearest \$20,000)                                                                                                                                   | \$10,000 or more <input type="checkbox"/> ⇒ \$ _____<br>Expenses (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. Check box to indicate expense accounting method. See instructions for description of options. |
|                                                                                                                                                                                                                                | <input type="checkbox"/> Method A. Reporting amounts using LDA definitions only                                     |
|                                                                                                                                                                                                                                | <input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code          |
|                                                                                                                                                                                                                                | <input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code              |

Signature

Printed Name and Title

LD-2 (REV. 6/98)

*Mark D. McIntyre*  
*MARK D. MCINTYRE SR. VP*

PAGE 1 OF

Registrant Name RUSS REID CO. Client Name GOSPEL RESCUE MINISTRIES

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the registrant engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code, provide information as requested. Attach additional page(s) as needed.

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

16. Specific lobbying issues

N/A

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

N/A

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

| Name             | Covered Official Position (if applicable) | New                      |
|------------------|-------------------------------------------|--------------------------|
| MARK D. MCINTYRE |                                           | <input type="checkbox"/> |
| TOM KELLER       |                                           | <input type="checkbox"/> |
| JOVITA WENNER    |                                           | <input type="checkbox"/> |
|                  |                                           | <input type="checkbox"/> |
|                  |                                           | <input type="checkbox"/> |
|                  |                                           | <input type="checkbox"/> |
|                  |                                           | <input type="checkbox"/> |
|                  |                                           | <input type="checkbox"/> |

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

Signature Mark D. McIntyre Date 07-01-01  
Printed Name and Title MARK D. MCINTYRE, SR. VP

Registrant Name RUSS REID CO. Client Name GOSPEL RESCUE MINISTRIES

**Information Update Page - Complete ONLY where registration information has changed.**

20. Client new address N/A

21. Client new principal place of business (if different from line 20)

City N/A State/Zip (or Country)

22. New general description of client's business or activities

N/A

**LOBBYIST UPDATE**

23. Name of each previously reported individual who is no longer expected to act as a lobbyist for the client

N/A

**ISSUE UPDATE**

24. General lobbying issues previously reported that no longer pertain

N/A

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

| Name       | Address | Principal Place of Business (city and state or country) |
|------------|---------|---------------------------------------------------------|
| <u>N/A</u> |         |                                                         |

26. Name of each previously reported organization that is no longer affiliated with the registrant or client

N/A

**FOREIGN ENTITIES**

27. Add the following foreign entities

| Name       | Address | Principal place of business (city and state or country) | Amount of contribution for lobbying activities | Ownership percentage in client |
|------------|---------|---------------------------------------------------------|------------------------------------------------|--------------------------------|
| <u>N/A</u> |         |                                                         |                                                |                                |

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

N/A

Signature Mark D. McIntyre Date 01-01-01

Printed Name and Title MARK D. MCINTYRE, SR. VP