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03 OCT 23 PM 3:

LOBBYING REPORT

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

1. Registrant Name The Petrizzo Group

2. Address Check if different than previously reported
444 North Capitol Street, NW Suite 535

3. Principal Place of Business (if different from line 2)
City: Washington State/zip (or Country) DC 20001

4. Contact Name T.J. Petrizzo Telephone 202-347-3898 E-mail (optional) _____

5. Senate ID # 53141

6. House ID # 3493

7. Client Name Self
Friends of Youth Organization

TYPE OF REPORT 8. Year 2002 Midyear (January 1-June 30) OR Year End (July 1-D

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

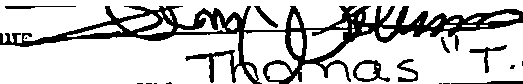
10. Check if this is a Termination Report ⇔ Termination Date _____

11. No Lobbying

INCOME OR EXPENSES Complete Either Line 12 OR Line 13

<p>12. Lobbying Firms</p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input checked="" type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇔ \$ _____ Income (nearest \$20,000)</p> <p>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).</p>	<p>13. Organizations</p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇔ \$ _____ Expenses (nearest \$:)</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA de</p> <p><input type="checkbox"/> Method B. Reporting amounts under section Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section Internal Revenue Code</p>
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Date: 10-23-03

Signature 
Printed Name and Title Thomas "T.J." Petrizzo, President

PA

LD-2 (REV. 4/03)

Registrant Name The Petrizzo Group Inc. Client Name Friends of Youth

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

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

16. Specific lobbying issues

FEDERAL Appropriations for Griffin Home Capitol Project

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

U.S. SENATE
U.S. House

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

Name	Covered Official Position (if applicable)
Thomas "T.J." Petrizzo	
Shay Hancock	
Kael Kennedy	

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

Signature [Handwritten Signature] Date 10-23-03

Printed Name and Title

THOMAS J. VETIZZO, PRESIDENT

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Form LD-2 (Rev. 4/03)