

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
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SECRETARY OF THE SENATE

05 SEP 23 PM 1:37

# LOBBYING REPORT

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

1. Registrant name			
Organization	Gibbons & Company, Inc.		
2. Address <input type="checkbox"/> Check if different than previously reported			
Address 1	P.O. Box 1037		
City	McLean	State	VA
		Zip Code	22101
			Country US
3. Principal place of business (if different than line 2)			
City	Washington	State	DC
		Zip Code	
			Country US
4a. Contact Name		b. Telephone number	c. E-mail
Prefix	Full Name		
Mr.	Clifford Gibbons	(202) 783-6000	gibbons@gibbonsco.com
7. Client Name <input type="checkbox"/> Self			5. Senate ID #
H. Lee Moffitt Cancer Center and Research Institute			16134-10
			6. House ID #
			3240901

TYPE OF REPORT 8. Year 2005 Midyear (January 1-June 30)  OR Year End (July 1-December)

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 Act

## INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

**12. Lobbying Firms**

INCOME relating to lobbying activities for this reporting period was:

Less than \$10,000

\$10,000 or more  ⇨ \$ 60,000

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).

**13. Organizations**

EXPENSES relating to lobbying activities for this reporting period were:

Less than \$10,000

\$10,000 or more  ⇨ \$ \_\_\_\_\_

**14. REPORTING METHOD.** Check box to indicate expense accounting method. See instructions for description of options.

**Method A.** Reporting amounts using LDA definitions of

**Method B.** Reporting amounts under section 6033(b)(8) Internal Revenue Code

**Method C.** Reporting amounts under section 162(e) of Revenue Code

Form C

Printed Name and Title Clifford S. Gibbons

0000461999




Registrant Name Gibbons & Company, Inc.

Client Name H. Lee Moffitt Cancer Center and R

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

15. General issue area code \_\_\_\_\_ (one per page)

16. Specific lobbying issues

*Add page to continue specific issues description for this issue* 

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 *Add a page to continue adding lobbyists for*

First Name	Name Last Name	Suffix	Covered Official Position (if applicable)
Clifford	Gibbons		

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

*Add a page for a diffe*

Printed Name and Title Clifford S. Gibbons

0000462000



Registrant Name Gibbons & Company, Inc. Client Name H. Lee Moffitt Cancer Center and R

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

20. Client new address

Address

City State Zip Code Country

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

City State Zip Code Country

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

**LOBBYIST UPDATE**

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

First Name Last Name Suffix First Name Last Name Suffix

1

3

2

4

**ISSUE UPDATE**

24. General lobbying issues that **no longer** pertain

Find the code to select below.

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

Name	Address	Principal place of Business (city and state or country)
	Address C/S/Z	City State Country
	Address C/S/Z	City State

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

1

2

3

**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
	Street Address City State/Province Country	City State Country		

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

1

3

5

2

4

6

Add a page for more

Printed Name and Title Clifford S. Gibbons

0000462001

