

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

SECRETARY OF
03 NOV 17

LOBBYING REPORT

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

1. Registrant Name Flanagan Consulting LLC	
2. Address <input type="checkbox"/> Check if different than previously reported 1317 F Street, NW, Suite 800, Washington, DC 20004	
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____	
4. Contact Name Michael P. Flanagan	Telephone 202-662-3735
E-mail (optional)	5. Senate ID # 74272-19
7. Client Name <input type="checkbox"/> Self Correctional Vendors' Association	6. House ID # 35996008

TYPE OF REPORT

8. Year 2003 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 _____ 11. No lobbying Activity

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p align="center">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"/> <input checked="" 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 align="center">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"/> <input checked="" type="checkbox"/> \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instruction for description.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6011 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code.</p>
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Signature _____

Printed Name and Title Michael P. Flanagan, President

LD-2 (Rev. 6/98)

Registrant Name Flanagan Consulting LLC, Client Correctional Vendors' Association

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 MAN (one per page)

16. Specific lobbying issues

Federal Prison Industries' Issues

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

US House of Representatives
US Senate
Department of Justice


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

Name	Covered Official Position (if applicable)	New
Michael P. Flanagan		X
		<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 list on line 16 above Check if None



17 NOV 08

Signature  . Date ~~25 JUL 98~~

Printed Name and Title Michael P. Flanagan, President

Form LD-2 (Rev. 6/98)

Page :

Registrant Name Flanagan Consulting LLC Client Correctional Vendors' Association

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 SMB (one per page)

17. Specific lobbying issues

Federal Prison Industries' 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)	New
Michael P. Flanagan		X
		<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 list on line 16 above Check if None

Michael P. Flanagan
 Filing #a08104b2-439a-4018-bf57-242701ba4314 - Page 5 of 10

17 NOV 03

Signature , Date ~~22 JUL 03~~

Printed Name and Title Michael P. Flanagan, President

Form LD-2 (Rev. 6/98)

Page 1

Registrant Name Flanagan Consulting LLC, Client Correctional Vendors' Association

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 GOV (one per page)

18. Specific lobbying issues

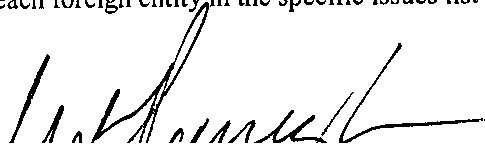
Federal Prison Industries' Issues

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

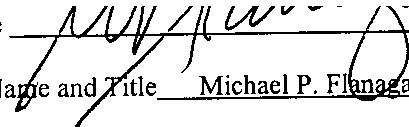
18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)	New
Michael P. Flanagan		X
		<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 list on line 16 above Check if None



17 Nov 03

Signature , Date 25 JUL 03

Printed Name and Title Michael P. Flanagan, President

Form LD-2 (Rev. 6/98)

Page

Registrant Name Flanagan Consulting LLC Client Name Correctional Vendors' Association

Information Update Page – Complete ONLY where registration information has changed.

20. Client new address

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

City _____ State/Zip (or 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

ISSUE UPDATE

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

AFFILIATED ORGANIZATIONS

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Bu (City and state or co
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26. Name of each previously reported organizations that is **no longer** affiliated with the registrant or client

FOREIGN ENTITIES

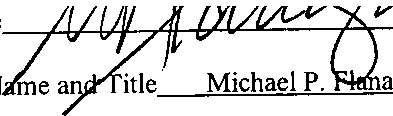
27. Add the following foreign entities

Name	Address	Principal place of business (City and state or country)	Amount of contribution For lobbying activities	Ow Per Cli
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28. Name of each previously reported foreign entity that **no longer** owns, or controls or is affiliated with the regi
or affiliated organization



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Signature  Date 23 JUL 03

Printed Name and Title Michael P. Flanagan, President

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