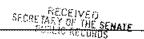
Clark of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, DC 20515

: 28

Secretary of the Senate Office of Public Records 232 Harl Building Washington, DC 20510



## LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4)

99 APR 29 PH 1:55

Che	teck if this is an amended registration	Effective Date of Registration  Senate Identification Number			
2. H	House Identification Number 8				
	EGISTRANT				
3. 	Registrant Name McGuire, Woods, Battle & Boothe LLP - McGuire Woods Consulting LLC				
	Address 1050 Connecticut Avenue, NW, Sui	ite 1200			
	City Washington	State DC Zip 200036-5317			
4.	Principal place of business (if different from line 3)				
	City State/Zip (or Country)				
i,	Telephone number and contact name				
	(202) 857-2900 Contact Steph	en A. Katsurinis E-mail (optional)			
5.	General description of registrants business or activities				
	Consulting				
CL	${f LIENT}$ . A Lobbying firm is required to file a separate registration for $e$ .	ach client. Organizations employing in-house labbyists should check the hox			
CL	LIENT A Lobbying firm is required to file a separate registration for extra Labelled Self and proceed to line 10. $\square$ Self	nch client. Organizations employing in-house lobbyists should check the box			
	Sabeled Belf and proceed to line 10. 🔲 Self				
	tabeled Self and proceed to line 10.	nch client. Organizations employing in-house lobbyists should check the box			
	Labeled Self and proceed to line 10. Self  Client name Stillman College  Address Post Office Box 1430  City Tuscaloosa	State AL Zip 35403			
· <u>·</u>	Labeled Self and proceed to line 10. Self  Client name Stillman College  Address Post Office Box 1430				
? <u>.                                    </u>	Client name Stillman College  Address Post Office Box 1430  City Tuscaloosa  Principal place of business (if different from line 7)  City	State AL Zip 35403  State/Zip (or Country)			
	Client name Stillman College  Address Post Office Box 1430  City Tuscaloosa  Principal place of business (if different from line 7)	State AL Zip 35403 State/Zip (or Country)			
7. I.	Client name Stillman College  Address Post Office Box 1430  City Tuscaloosa  Principal place of business (if different from line 7)  City  General description of client's business or activities	State AL Zip 35403  State/Zip (or Country)			
	Client name Stillman College  Address Post Office Box 1430  City Tuscaloosa  Principal place of business (if different from line 7)  City  General description of client's business or activities Institution of Higher Education  DBBYISTS  Name of each individual who has auted or is expected to act as a	State AL Zip 35403  State/Zip (or Country)  lobbyist for the client identified on line 7. If any person listed in this vected legislative branch official? within two years of first acting as a			
	Client name Stillman College Address Post Office Box 1430  City Tuscaloosa  Principal place of business (if different from line 7)  City  General description of client's business or activities Institution of Higher Education  DBBYISTS  Name of each individual who has auted or is expected to act as a section has served as a "covered executive branch official" or "co	State AL Zip 35403  State/Zip (or Country)  lobbyist for the client identified on line 7. If any person listed in this vected legislative branch official? within two years of first acting as a			
	Client name Stillman College Address Post Office Box 1430  City Tuscaloosa  Principal place of business (if different from line 7)  City  General description of client's business or activities Institution of Higher Education  OBBYISTS  Name of each individual who has acted or is expected to act as a section has served as a "covered executive branch official" or "co lobbyist for the client, state the executive and/or legislative position is a section of the client, state the executive and/or legislative position is a section of the client, state the executive and/or legislative position is a section of the client, state the executive and/or legislative position.	State AL Zip 35403  State/Zip (or Country)  lobbyiss for the client identified on line 7. If any person listed in this vectod legislative branch official within two years of first acting as a ion(s) in which the person served.			
.Oo.	Client name Stillman College  Address Post Office Box 1430  City Tuscaloosa  Principal place of business (if different from line 7)  City  General description of client's business or activities Institution of Higher Education  DBBYISTS  Name of each individual who has auted or is expected to act as a section has served as a "covered executive branch official" or "co lobbyist for the client, state the executive and/or legislative position.  Name  By L. Albright, L.F. Payne, Jr.,	State AL Zip 35403  State/Zip (or Country)  lobbyiss for the client identified on line 7. If any person listed in this vectod legislative branch official within two years of first acting as a ion(s) in which the person served.			
o.	Client name Stillman College Address Post Office Box 1430  City Tuscaloosa  Principal place of business (if different from line 7)  City  General description of client's business or activities Institution of Higher Education  OBBYISTS  Name of each individual who has auted or is expected to act as a section has served as a "covered executive branch official" or "co lobbyist for the client, state the executive and/or legislative position in the client, state the executive and/or legislative position.  Name	State AL Zip 35403  State/Zip (or Country)  lobbyiss for the client identified on line 7. If any person listed in this vectod legislative branch official within two years of first acting as a ion(s) in which the person served.			

Registrant Name McGuire	: Woodş		Client Name Stillman Co	okege		
LOBBYING ISSU:	_~	licable c	odes listed in instructions and	on the reverse side of For	m LD-1, page 1.	
12. Specific lobbying issue	es (current and antici	pated)				
Educational and funding	ng issues for instit	tution (	of higher education	·		
	r than the client that	- contribu	tes more than \$10,000 to the plans, supervises or controls			
🔀 No 🖈 Go to lin	e 14.	☐ Yes \$\preceq\$ Complete the rest of this section for each entity matching the criteria above, then proceed to line 14.				
Name		Address		Principal Place of Business (gity and state or county)		
	WWW					
FOREIGN ENTIT						
<ul><li>b) directly subsidiz</li><li>c) is an aff</li></ul>	or indirectly, in wi ted activities of the	hole or client or any e	ership in the elient or any or in major part, plans, super- or any organization identifi organization identified on i	vises, controls, directs, fi ed on line 13; <b>or</b>	nances or	
M No → Sign and	date the registration	ù	. ☐ Yes_ Complete	the rest of this section f	or each entity	
Name	Name Address		Principal place of business (city and state or country)	Amount of contribution for lobbying activities	Ownership percentage in client	
Signature Sty	Aver GL Stephen A. K.	atsurin	Date is, Attorney	april 27, 19	75	
Form Li)-4 (Rev 06/98)					P <b>≽</b> gc 2	

£ 2 -