

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 THE SENATE

06 APR -5 PM 1:45

LOBBYING REPORT

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

1. Registrant Name <u>SECURITY INDUSTRY ASSOCIATION</u>			
2. Address <input type="checkbox"/> Check if different than previously reported <u>635 SLATERS LANE, SUITE 110</u>			
3. Principal Place of Business (if different from line 2) City: <u>ALEXANDRIA</u> State/Zip (or Country) <u>VA, 22314</u>			
4. Contact Name <u>DON ERICKSON</u>		Telephone <u>703-647-8484</u>	E-mail (optional) <u>derickson@S.I.A.ONLINE.ORG</u>
7. Client Name <input type="checkbox"/> Self		5. Senate ID # <u>78356</u>	
		6. House ID #	

TYPE OF REPORT 8. Year 2005 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 /

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 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 checked="" type="checkbox"/> ⇒ \$ <u>100,305</u> Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description of:</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code</p>
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Signature



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Printed Name and Title DONALD R. ERICKSON, DIRECTOR OF GOVERNMENT REL

LD-2 (REV. 6/98)

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Registrant Name Security Industry Assn. Client Name _____

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

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

16. Specific lobbying issues

appropriations pertaining to the electronic physical sec industry.

17. House(s) of Congress and Federal agencies contacted

Check if None

U.S. House; U.S. Senate

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

Name	Covered Official Position (if applicable)
<i>Cathryn MROSKO</i>	

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature *[Signature]* Date *3/21/06*

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Printed Name and Title DONALD R. ERICKSON, Director of Government R

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Registrant Name Security Industry Assn. Client Name _____

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 TAX (one per page)

16. Specific lobbying issues

Business Expanding of Security Devices.

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)
<i>Cathryn Moskko</i>	

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

Signature *Michael R. Gh...* Date 3/27/06

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Printed Name and Title DONALD R. ERICKSON, Director of Government Re

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Registrant Name Security Industry Assn. Client Name _____

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 Business (city and state or country)


26. Name of each previously reported organization 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

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

Signature  Date 3/27/06

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Signature _____

Printed Name and Title DONALD R. ERICKSON, Director of Government

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