

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
 04 FEB 2006

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 #
7. Client Name <input type="checkbox"/> Self Simulation Technologies, Inc.			6. House ID # 35996007

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 style="text-align: center;">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 ⇨ \$ <u>40,000</u> 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 style="text-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"/> ⇨ \$ _____ Expenses (nearest \$20,000)</p> <p>14. REPORTING METHOD. Check box to indicate reporting method. See instruction for description of method.</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 603 Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162 Internal Revenue Code.</p>



Registrant Name Flanagan Consulting LLC , Client Simulation Technologies, Inc.

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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 addition page(s) as needed.

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

16. Specific lobbying issues

Defense Issues

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

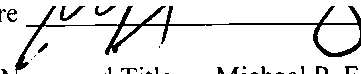
- US House of Representatives
- US Senate
- Department of Defense
- Department of Homeland Security
- GSA

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

Name	Covered Official Position (if applicable)	New
Michael P. Flanagan		<input type="checkbox"/>
Glenn G. Lackey		<input type="checkbox"/>
Adam Eisgrau		<input type="checkbox"/>
Steve Geise		X
		<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



Signature  Date 09 FEB 04

Printed Name and Title Michael P. Flanagan, President

Form LD-2 (Rev. 6/98)

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Registrant Name Flanagan Consulting LLC Client Name Simulation Technologies, Inc.

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

Signature 

Signature _____

Printed Name and Title Michael P. Flanagan, President

Form LD-2 (Rev. 6/98)

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