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

Secretary of the Senate E
Office of Public Records OF THE SENATE
RECURDS
Washington, DC 20510

LOBBYING REPORT

## Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required to Complete This Page 1. Registrant name Organization Will & Carlson, Inc. 2. Address Check if different than previously reported Address 1 5335 Wisconsin Avenue NW Suite 440 Washington State DC Zip Code 20015 Country US City 3. Principal place of business (if different than line 2) Zip Code Country State City State/Zip or Country 4a. Contact Name b. Telephone number c. E-mail 5. Senate ID# Prefix **Full Name** 414325 rwlee@willandcarlson.com Mrs. Renee Wilson-Lee (202) 478-9669 7. Client Name 6. House ID# Water Replenishment District 3108700 2006 TYPE OF REPORT 8. Year Midyear (January 1-June30) OR Year End (July 1-Decembe 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 13. Organizations INCOME relating to lobbying activities for this reporting period EXPENSES relating to lobbying activities for this reporting Less than \$10,000 Less than \$10,000 20,000 \$10,000 or more \$10,000 or more 14. REPORTING METHOD. Check box to indicate exp Provide a good faith estimate, rounded to the nearest \$20,000, accounting method. See instructions for description of opt of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying Method A. Reporting amounts using LDA definitions activities on behalf of the client). Method B. Reporting amounts under section 6033(b)( Internal Revenue Code Method C. Reporting amounts under section 162(e) of Revenue Code

Form

Client Name Water Replenishment District

(one per page)

17. House(s) of	Congress and Federal	agencies contacted	Check if None
	f the Army, Corps of Engin I Protection Agency	eers	
	ch individual who acted Name	1	nis issue area  Covered Official Position (if applicable)
First Name Peter	Last Name Carlson	Suffix	
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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 coc

Registrant Name \_\_\_ Will & Carlson, Inc.

16. Specific lobbying issues

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

15. General issue area code \_\_\_\_\_

Page 2

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Registrant Name Will & Carlson, Inc.			Client Name Water Replenishment District			
engaged in lobby		ient during the repor	sary to reflect the general issue areas in which the ting period. Using a separate page for each couded.			
15. General issue	area code NAT - Nati	ural Resources	(one per page)			
16. Specific lobb	ying issues	A.A	n pag , to containe specific assues description for tracessue.			
	728, Water Resources er Infrastructure Financ		f 2005			
17. House(s) of C House of Repre Senate	Congress and Federal a	igencies contacted	Check if None			
18. Name of each	h individual who acted Name Last Name	l as a lobbyist in this	s issue area And a page to continue adding consects for Covered Official Position (if applicable)			
Peter	Carlson					
		.,,,,,				
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			•			
19. Interest of ea	ch foreign entity in the	e specific issues list	ed on line 16 above 🔀 Check if None			
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LD-2DS (Rev. 4.06)

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Registrant Name Will &	Carlson, Inc.	Client Na	Client Name Water Replenishment District				
	late Page - Complet	e ONLY where regis	tration inforn	nation has changed	<b>1.</b>		
20. Client new address Address							
City		State	Zip Code	Countr	y		
	al place of business (if diff						
City		State	Zip Code	Countr	у 		
22. New general descri	ription of client's business	or activities					
LOBBYIST UPD.							
23. Name of each pr	eviously reported indivi-	dual who is <b>no longer</b> e	xpected to act as	s a lobbyist for the cl	ient s		
		3					
2		4	·				
ISSUE UPDATE		-		valent halow			
	g issues that <b>no longer</b> p	· · · · · · · · · · · · · · · · · · ·	nd the code to s	select below.			
AFFILIATED OI	RGANIZATIONS		<del></del>				
	ng affiliated organization	(s)			<u>.</u>		
Nam	e	Address		Principal place of Busine (city and state or country)			
	Address			City			
	C/S/Z			State Cou	intry		
	Address C/S/Z			City State			
26. Name of each pr	reviously reported organ	ization that is no longer	affiliated with	the registrant or clien	ıt		
	2		3		-		
FOREIGN ENTI	TIES		<u></u>	<del></del>			
27. Add the following				Amount of contribution	T <sub>Ov</sub>		
Name	Address Street Address	•	place of business state or country)	for lobbying activities	peı çli:		
	City State/	City	••••				
		State	Country				
28. Name of each pre	viously reported foreign er			affiliated with the regi	strant		
affiliated organiza		inty mac its conger toward,	_	_			
	3		5	-			
2	[4]		[6	<u>.</u>			
Printed Name and Tit	le Peter Carlson - P	resident					
Fili	ng #a7e1e60f-3ab5-470a-	b1b4-2f835710edea - Pa	ge 7 of 8				