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LOBBYING REPORT

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

1. Registrant Name Liz Robbins Associates			
2. Address <input type="checkbox"/> Check if different than previously reported 441 New Jersey Avenue, SE			
3. Principal Place of Business (if different from line 2) Washington DC 20003 City: State/zip (or Country)			
4. Contact Name	Telephone	E-mail (optional)	5. Senate ID #
Liz Robbins	(202) 544-6093	liz@lizrobbins.com	33432-87
7. Client Name <input type="checkbox"/> Self Fischer International Affairs Systems Corp			6. House ID # 32204017

TYPE OF REPORT 8. Year 2003 Midyear (January 1-June 30) OR Year End (July 1-D

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 Lobby

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 type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ <u>60,000.00</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 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 accounting method. See instructions for description of</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>

(Signature)

- 1 - 1

Signature *Liz Robbins* Date 2/17/2004

Printed Name and Title Liz Robbins, Principal/Owner

Registrant Name Liz Robbins Associates Client Name Fischer International Affairs Systems Co

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

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

16. Specific lobbying issues

Autism Research Initiatives

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

House of Representatives, Senate

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

Name	Covered Official Position (if applicable)
Liz Robbins	Principal/Owner

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

Signature *Liz Robbins* Date 2/17/2004

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Printed Name and Title Liz Robbins, Principal/Owner

Form LD-2 (Rec. 4/03)

Page 2

Registrant Name Liz Robbins Associates Client Name Fischer International Affairs Systems Co

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

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

16. Specific lobbying issues

Legislative tracking

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

House of Representatives, Senate

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

Name	Covered Official Position (if applicable)
LIZ ROBBINS	PRINCIPAL / OWNER

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

Signature *[Signature]* Date 2/17/2004

