

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
---	--

RECEIVED  
 SECRETARY OF THE SENATE  
 PUBLIC RECORDS

04 FEB 24 PM 2:48

# LOBBYING REPORT

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

1. Registrant Name <b>JAMES B. HUGGINS</b>			
2. Address <input type="checkbox"/> Check if different than previously reported <b>The Cottone and Huggins Group                  Consultants in Governmental Affairs                  601 Pennsylvania Ave., N.W., Suite 900 So.                  Washington, D.C. 20004</b>			
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country) _____			
4. Contact Name <b>Self</b>	Telephone <b>202 547 3566</b>	E-mail (optional)	5. Senate ID # <b>1882</b>
7. Client Name <input type="checkbox"/> Self <b>Spectrum Astro</b>			6. House ID # <b>31906</b>

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


9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report  ⇒ Termination Date APR. 30 2003

11. No Lobbyir

## INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p align="center"><b>12. Lobbying Firms</b></p> <p><b>INCOME</b> relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input checked="" 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 align="center"><b>13. Organizations</b></p> <p><b>EXPENSES</b> relating to lobbying activities for this re 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><b>14. REPORTING METHOD.</b> Check box to indicat accounting method. See instructions for description o</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA defini</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>
--	--

Signature 

Printed Name and Title JAMES B. HIGGINS CEO

LD-2 (REV. 6/98)

P

Registrant Name HUGGINS Client Name Spectrum Asho

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

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

16. Specific lobbying issues

DOD Approps.

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

Check if None

SENATE  
HOUSE

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

Name	Covered Official Position (if applicable)
<u>Self</u>	

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

Check if None

[Signature]

2-9-04

Signature [Handwritten Signature] Date 7-12-20

Printed Name and Title JAMES B HUGGINS

Form LD-2 (Rev.6/98)

Page

Registrant Name HOOBENS Client Name Spectrum Astro

**Information Update Page - Complete ONLY where registration information has changed.**

20. Client new address

NA

21. Client new principal place of business (if different from line 20)

City

NA

State/Zip (or Country)

22. New general description of client's business or activities

NA

**LOBBYIST UPDATE**

23. Name of each previously reported individual who is no longer expected to act as a lobbyist for the client

NA

**ISSUE UPDATE**

24. General lobbying issues previously reported that no longer pertain

NA

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

Name	Address	Principal Place of Business (city and state or country)
NA		

26. Name of each previously reported organization that is no longer affiliated with the registrant or client

NA

**FOREIGN ENTITIES**

27. Add the following foreign entities

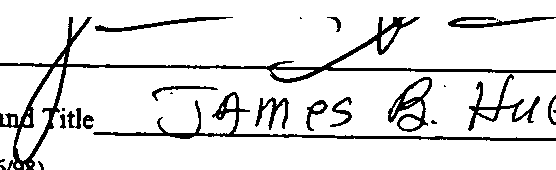
Name	Address	Principal place of business (city and state or country)	Amount of contribution for lobbying activities
NA			

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

NA

2-9-06

Signature



Date

9-15-20

Printed Name and Title

JAMES B. HUGHES

Form LD-2 (Rev. 6/98)

Page