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

John Dutton

Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510

SECRETARY (

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## LOBBYING REGISTRATION

Lobbying Disclosure Act of 1995 (Section 4) 1. Effective Date of Registration 3/19/03 Check if this is an Amended Registration 2. House Identification Number Senate Identification Number REGISTRANT 3. Registrant Name Manatt, Phelps & Phillips Address 1501 M Street, NW, Suite 700 Washington, D.C. Zip 20005 City State 4. Principal place of business (if different from line 3) City same as above State/Zip (or Country) 5. Telephone number and contact name (202)463-4300 E-mail (optional) Contact Stephen M. Ryan Law firm 6. General description of registrant's business or activities CLIENT A Lobbying firm s required to file a separate registration statement for each client. Organizations employing in-house lobb check the box labeled "Self" and proceed to line 10. 7. Client Name Shakespeare Theatre 516 8th Street, S.E. Address Washington Zip 20003 DC City State 8. Principal place of business (if different from line 7) State/Zip (or Country) City Entertainment Theatre 9. General description of client's business or activities LOBBYISTS 10. Name of each individual who has acted or is expected to act as a lobbyist for the client identified on line 7. If ar listed in this section has served as a "covered executive branch official" or "covered legislative branch official" v years of first acting as a lobbyist for the client, state the executive and/or legislative position(s) in which the per-Name Covered Official Position (if applicable Stephen M. Ryan Luke Rose Michael T. Brown

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Form LD-1 (Rev. 06/98)

Registrant Name	Manatt, Phelps & Phillips	Client Name Shakesp	peare Theatre		
LOBBYING I  11. General lobbying  BUD	SSUES issue areas. Select all applicable	e codes listed in instructions ar	nd on the reverse side of Form		
	issues (current and anticipated) g Arts Center				
13. Is there an entity o	ORGANIZATION other than the client that contribution and in whole or in major part p	ites more than \$10,000 to the l			
<b>≥</b> No ⇔ Go	to line 14.		est of this section for each entive, then proceed to line 14.		
Name	е	Address	Principal Place of B (city and state or co		
b) directly activitie c) is an affi		or part, plans, supervises, cont on identified on line 13; <b>or</b>	rols, directs, finances or subsid		
No ⇒ Sign and date the registration		matching	Yes © Complete the rest of this section for each matching the criteria above, then sign a registration.		
Name	Address	Principal place of business (city and state or cou	Amount of contribution for		
Signature Fil	ing #ab86e054-3f00-4204-a438-a	Da <sup>-</sup> ac8915a2d76c - Page 3 of 4	te 4/50/0.		

		 7
Printed Name and Title	Stephen M. Ryan	

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