

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

SECRETARY OF THE
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LOBBYING REPORT

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

1. Registrant Name Will & Carlson, Inc.			
2. Registrant Address <input type="checkbox"/> Check if different than previously reported Address 1015 18th Street, N.W. Suite 600 City Washington State/Zip (or Country) DC 20036			
3. Principal Place of Business (if different from line 2) City _____ State/Zip (or Country) _____			
4. Contact Name Kristen Haskett			5. Senate ID # 41432-140
Telephone 202-429-4344			E-mail (optional) willcarl@erols.com
7. Client Name <input type="checkbox"/> Self Western Coalition of Arid States			6. House ID # 31087008

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 Lobl

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>\$40,000.00</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</p> <p>14. REPORTING METHOD. Check box to indicate accounting method. See instructions for description</p> <p><input type="checkbox"/> Method A. Reporting amounts using LDA definition</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6 of the Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 1 of the Internal Revenue Code</p>
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Signature _____ Date 8/12/2003

Printed Name and Title Peter Carlson - Principal

Registrant Name: Will & Carlson, Inc.

Client Name: Western Coalition of Arid States

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 additional page(s) as needed.

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

16. Specific Lobbying issues
 H.R.1560, The Water Quality Financing Act of 2002,
 H.R.1662, The Sound Science for Endangered Species Act Planning Act of 2002,
 H.R.20, Clean Water Infrastructure Financing Act of 2003,
 H.R.3208, Western Water Enhancement Security Act,
 HR.3178, The Water Infrastructure Security and Research Development Act,
 HR.3996, The Water Quality Research, Development, and Technology Demonstration Act,
 S.1097, H.R.2641, CalFed Bay Delta Program,
 S.993, A bill to amend the Small Reclamation Project Act of 1956,

17. House(s) of Congress and Federal agencies contacted Check if None
 Bureau of Reclamation
 House of Representatives
 Senate

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

Name	Covered Official Position (if applicable)
Carlson, Peter	
Will, Robert	

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

Signature _____ Date 01/17/2005

Printed Name and Title Peter Carlson - Principal

Registrant Name: Will & Carlson, Inc.

Client Name: Western Coalition of Arid States

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
 McLellan, Eileen

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 (city and state)

26. Name of each previously reported organization 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 contrib for lobbying activ

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

Signature Peter Carlson Date 8/12/2003

Printed Name and Title Peter Carlson - Principal