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## LOBBYING REPORT

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

1. Registrant Name <b>CAPITOL STRATEGIES</b>			
2. Address <input type="checkbox"/> Check if different than previously reported <b>4201 Wilson Blvd #110-C</b>			
3. Principal Place of Business (if different from line 2) City: <b>Arlington</b> State/Zip (or Country) <b>VA 22203</b>			
4. Contact Name <b>MONTY TRIPP</b>	Telephone <b>703 3589570</b>	E-mail (optional)	5. Senate ID # <b>8156-51</b>
7. Client Name <input type="checkbox"/> Self <b>Surtex International</b>	6. House ID # <b>33777004</b>		

TYPE OF REPORT 8. Year \_\_\_\_\_ Midyear (January 1-June 30)  OR Year End (July 1-December 31)

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 Activity

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

12. Lobbying Firms	13. Organizations
INCOME relating to lobbying activities for this reporting period was: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ <u>40,000</u> <small>Income (nearest \$20,000)</small>	EXPENSES relating to lobbying activities for this reporting period were: Less than \$10,000 <input type="checkbox"/> \$10,000 or more <input type="checkbox"/> ⇨ \$ _____ <small>Expenses (nearest \$20,000)</small>
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).	14. REPORTING METHOD. Check box to indicate expense accounting method. See instructions for description of options. <input type="checkbox"/> Method A. Reporting amounts using LDA definitions only <input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code <input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code

Signature

*Monty Tripp*

Printed Name and Title

**MONTY TRIPP, PARTNER**

LD-2 (REV. 6/98)

PAGE 1 of 2

Registrant Name CAPITOL STRATEGIES Client Name Swatex International

**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 Edu (one per page)

16. Specific lobbying issues

Elementary + Secondary education funding

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

House  
Senate  
Dept. of Education  
Dept. of Defense

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

Name	Covered Official Position (if applicable)	New
<u>MARY M. (MONTY) TRIPP</u>		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

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

Signature Mary M. Tripp Date 2/9/01

Printed Name and Title MARY M. (MONTY) TRIPP